UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

REQUESTOR CONTACT INFORMATION	
Date: 9/14/11	Effective term of request (Semester-Year): Fall 2012
Name: Katharyn Daub	Title: Director, School of Nursing
Campus: UH Hilo	Office/Department: School of Nursing
Phone: 974-7761	Email: katharyn@hawaii.edu

1. PROGRAM CODE, MAJOR CODE, CONCENTRATION CODE		Banner forms: SMAPRLE, SOACURR, STVMAJR
Institution: UH Hilo (HIL)	College: College of Arts & Sciences	Department: School of Nursing
☑ New program code ☐ Change/replace existing program code:		
Level: ☐ Undergraduate ■ Graduate ☐ First-Professional ☐ Post-Baccalaureate ☐ Other:		
Degree: Doctor of Nursing Practice	Certificate:	
If requesting an existing Major code and/or Concentration code in Banner: Existing Major: Code Description Existing Concentration: Code Description		
If requesting a new ■ Major code or ☐ Concentration code that does not exist in Banner: New Code [4 char/space limit]: NURD Description [30 char/space limit]: Nursing Practice If a similar major/concentration code exists in Banner, please list the code: NURS Is this major/concentration code being used the same way at other UH campuses? YES AT UH MANOA		
Is 50% or greater of the classes in this program offered at a location other than the Home Campus? ☐ Yes ☑ No (Please consult your Financial Aid Officer on Program Participation Agreement impact)		
Is this program/major/certificate financial aid eligible? ☑ Yes ☐ No (Financial Aid Officer consultation required for all new program codes)		
Should this program be available for applicants to select as their planned course of study on the online application? ☑ Yes ☐ No (If yes, students may select the code as their only program of study.)		

UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

Replacing or eliminating an existing program code:

If replacing an existing program code, are current students "grandfathered" under the old code? ☐ Yes ☐ No

Should the old program code be available for use in Banner? ☐ Yes ☐ No

Will the old program code be available for:

Banner Module	Yes	No	Ending Term (Semester-Year)
Online Application	☐	☐	
Recruitment	☐	☐	
Admissions	☐	☐	
General Student	☐	☐	
Academic History	☐	☐	

2. CERTIFICATES ONLY:

Does this certificate qualify as a Gainful Employment Program (Title IV-eligible certificate program)? ☐ Yes ☐ No
(Please consult your Financial Aid Officer or see: http://www.ifap.ed.gov/GainfulEmploymentInfo/index.html)

For new certificates approved by the Chancellor, the related BOR authorized academic program is:

3. NEW CAMPUS, COLLEGE, DIVISION, OR DEPARTMENT CODE Banner forms: STVCAMP, STVCOLL, STVDIVS, STVDEPT

Campus code [3 char]:	Campus description [30 char/space limit]:
College code [2 char]:	College description [30 char/space limit]:
Division code [4 char/space limit]:	Division description [30 char/space limit]:
Department code [4 char/space limit]:	Department description [30 char/space limit]:

UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

4. NEW COURSE SUBJECT CODE (Subject Alpha)	Banner form: STVSUBJ
College:	Department:
Subject code [4 char/space limit]:	Subject description [30 char/space limit]:

5. NEW MINOR (Minor codes are listed on the Major code table)	Banner form: STVMAJR
Minor Code [4 char/space limit]:	Minor Description [30 char/space limit]:

Please briefly describe your request and explain why you are requesting the code(s):

SUPPORTING DOCUMENTATION

Please see the **Code Request Guide** for the required supporting documents to be submitted. Documents submitted with this form:

- [x] Board of Regents meeting minutes and supporting documents provided to the BOR
- [ ] Memo from UH President
- [x] Memo from Chancellor
- [ ] Curriculum (required for requests for new programs/majors/minors/certificates)
- [ ] Gainful Employment Program notification to the US Department of Education
- [ ] Other: _____

UNIVERSITY OF HAWAI'I
CODE REQUEST FORM FOR ACADEMIC PROGRAM CODES

CAMPUS VERIFICATION		
Requestor Signature		Date 9-13-2011
Registrar (If different from Requestor) Cathy A. Zenz Print name	Signature	9/15/11 Date
Email/memo in lieu of Registrar's signature may be attached		
Financial Aid Officer (Financial Aid Officer consultation required for all new program codes) Jeff R. Scofield Print name	Signature	09/27/2011 Date
Email/memo in lieu of Financial Aid Officer's signature may be attached		
For Community Colleges, verification of consultation with OVPCC Academic Affairs: Print name	Signature	Date
Email/memo in lieu of signature may be attached		

Send completed form and supporting documentation to:

Institutional Research and Analysis Office (IRAO)
1633 Bachman Place
Sinclair Annex 2, Room 4
Honolulu, HI 96822

Email: iro-mail@lists.hawaii.edu
Fax: 808-956-9870
Phone: 808-956-7532

After <u>all</u> required forms and supporting documents have been submitted, please allow at least two weeks for processing by IRAO and Banner Central.

FOR INTERNAL USE ONLY	Date form/docs received:
Program code [12]:	Program Description [30]:
CIP code [6]:	CIP description [30]:

UNIVERSITY OF HAWAI'I AT HILO
Office of the Vice Chancellor for Academic Affairs

September 14, 2011

MEMORANDUM

TO: Linda Johnsrud, Vice President
Academic Policy and Planning, University of Hawaii System

VIA: Donald Straney Chancellor
University of Hawai'i at Hilo

FROM: Kenith Simmons
Interim Vice Chancellor for Academic Affairs

SUBJECT: Code Request: Doctor of Nursing Practice

We request the following Banner code for the UH Hilo Doctor of Nursing Practice:

Doctor of Nursing Practice Code: NURD

The DNP will admit its first students in Fall 2012.

Thank you for your assistance in notifying the appropriate University offices so this program will be reflected properly in the University's operational and reporting systems.

Cc: Randy Hirokawa, Dean, College of Arts and Sciences
Cathy Zenz, Registrar
Luoluo Hong, Vice Chancellor for Student Affairs
Pearl Imada Iboshi, Director, UH System Institutional Research Office
Joanne Itano, Director, Academic Planning and Policy
Katharyn Daub, Director, School of Nursing, College of Arts and Sciences

200 W. Kawili Street, Hilo, Hawai'i 96720-4091
Telephone: (808) 974-7707, Facsimile: (808) 974-7622, http://hilo.uhh.hawaii.edu/uhh/vcaa/

12497

UNIVERSITY OF HAWAI'I AT HILO

UH Hilo Administration
Office of the Chancellor

MEMORANDUM

April 26, 2011

UNIVERSITY OF HAWAII
BOARD OF REGENTS

APPROVED BY BOR
MAY 19, 2011
ec: J.Itano
P.Imada Iboshi
D.Mongold

TO: Howard H. Karr
Chairperson, University of Hawai'i Board of Regents

11 MAY 9 P3:00

VIA: M.R.C. Greenwood
President, University of Hawai'i

FROM: for Donald O. Straney
Chancellor, University of Hawai'i at Hilo

SUBJECT: AUTHORIZATION TO ESTABLISH AS A PROVISIONAL PROGRAM, THE DOCTORATE IN NURSING PRACTICE (DNP) AT THE UNIVERSITY OF HAWAI'I AT HILO (UH HILO), EFFECTIVE FALL 2012

SPECIFIC ACTION REQUESTED:

The University of Hawai'i at Hilo (UH Hilo) requests that the Board of Regents authorize a new provisional degree, the Doctorate in Nursing Practice (DNP), effective Fall 2012.

ADDITIONAL COST:

The proposed DNP program anticipates additional costs associated with the hiring of one full-time faculty member each year for the first three years of the program. In addition to the salaries of these three faculty members, there are expected costs associated with faculty recruitment activities and professional development activities. No additional physical classroom, faculty offices, or laboratory space will be needed. The program will utilize on-line and executive model courses allowing for use of existing BSN facilities. The community is the laboratory in a DNP program; therefore student experiences will occur in clinics, hospitals, and rural health care settings, eliminating the need for additional laboratory space.

Funding to develop and implement the DNP program will be through the use of grant funding and tuition revenues. The School of Nursing has already received the following two grants: (1) Health Resources and Services Administration (HRSA) funding for development of a DNP program grant for $350,000 and (2) a Special Congressional Initiative Health Resources Services Grant for over $383,000. In addition to these grants already received, the School of Nursing plans to apply for a HRSA program funding grant for the first few years of operation. In the event that no additional grants are received, the program is predicted to be sustainable with tuition revenues by the second year of operation.

200 W. Kawili Street, Hilo, Hawai'i 96720-4091
Telephone: (808) 974-7444, Facsimile: (808) 974-7622, www.uhh.hawaii.edu

RECOMMENDED EFFECTIVE DATE:

Fall 2012

PURPOSE:

To educate and train nurses to meet the increasing minimum education requirements for Advanced Practice Registered Nurses (APRNs).

BACKGROUND INFORMATION:

BOR Policy Section 5-1a (1) & (2) and Executive Policy E5.201 provide for the process to establish new programs at the University of Hawai'i. The proposed Doctorate in Nursing Practice (DNP) program at UH Hilo will culminate in a Board conferred degree and falls under the policies and procedures identified above.

Currently a master's prepared nurse can enter into an Advanced Practice Registered Nurse (APRNs) position. The American Association of Colleges of Nursing (AACN) endorsed a Position Paper which calls for a change in the minimum education requirement for APRNs to be increased from a master's degree to a practice doctorate by the year 2015.

In addition to meeting the increased educational requirements for APRNs, the creation of the DNP program at UH Hilo will help address the primary care provider shortage in Hawai'i. Currently there is such a lack of primary care providers available to residents of Hawai'i that the State of Hawai'i has been Federally Designated a Medically Underserved Area. In 2009, the Governor of Hawai'i signed legislation deeming APRNs as "primary care providers." The stature grants Hawai'i's APRNs with global signature authority, allowing access to full prescriptive authority (including controlled substances), medical equipment, and therapeutic regimens. Although APRNs nationwide have been working to help fill the primary care provider shortage, on the Big Island, there are only 76 APRNs (State of Hawai'i Board of Nursing Report, October, 2009). This is one of the lowest ratios of APRNs per capita in the US (1 APRN per 2,252.5 residents of the Big Island).

The UH Hilo School of Nursing has collaborated with the UH Mānoa School of Nursing and Dental Hygiene in the creation of two differentiated pathways leading to the DNP. UH Mānoa will offer a post-master's program to RNs with a master's degree in nursing or a related field. To meet the need for primary care providers on the Island of Hawai'i, UH Hilo proposes to offer both a post-baccalaureate and post-masters entry

into the Family Nurse Practitioner DNP program. The two programs will collaborate to strengthen the individual programs and create system level efficiencies. The programs have worked together to create a MOU to guide efforts to jointly consult, share best practices, create opportunities for faculty exchange, and allow access into specific courses at each campus for students.

Lastly, the DNP program is going to be a key component of the Rural Health Sciences Initiative. This initiative was set forth by Chancellor Straney in the Fall of 2010. The Rural Health Sciences Initiative is planned to draw together health care providers to solve rural health problems in Hawai'i and throughout the Pacific by means of research, education, community service, and policy development. The unit will be housed in the UH Hilo College of Pharmacy. Through this initiative, the UH Hilo School of Nursing's DNP program will collaborate with many partners in improving health care in our rural environment.

The UH Hilo School of Nursing received Authorization to Plan the Doctorate in Nursing Practice (DNP) from the UH Hilo Chancellor on August 18, 2010, following presentation and support from the Council of Chief Academic Officers on August 16, 2010.

The UH Hilo Faculty Congress approved the Doctorate in Nursing Practice (DNP) proposal on December 10, 2010.

ACTION RECOMMENDED:

The Board of Regents approves the establishment as a provisional program of the Doctorate in Nursing Practice (DNP), effective Fall 2012.

Attachment

Doctorate in Nursing Practice program proposal

N.B. A hard copy and an electronic copy of the full proposal (over 300 pages) will be available at the BOR office.

C: Executive Administrator and Secretary of the Board Keith Amemiya

UNIVERSITY of HAWAI'I
HILO

Proposal for Doctorate of Nursing Practice (DNP) Program

School of Nursing

College of Arts and Sciences
University of Hawai`i at Hilo
April 26, 2011

Proposal for Doctorate of Nursing Practice (DNP) Program

Department/Program	School of Nursing
Degree Proposed	Doctorate of Nursing Practice (DNP)
Proposed Date of Implementation	August 2012

Table of Contents

Page

Graduate Program

Appendices

*** *See the complete version of this proposal to view these appendices*

Executive Summary

The University of Hawai'i at Hilo School of Nursing (UHH SON), which currently offers a Baccalaureate of Science in Nursing (BSN), proposes to offer a Doctor of Nursing Practice (DNP) program. Creation of a DNP program will meet the increasing educational requirements for Advanced Practice Registered Nurses (APRNs) that are recommended for 2015. Currently a masters degree prepared nurse can enter into an APRN position. In 2004, the American Association of Colleges of Nursing (AACN) endorsed a Position Paper on the Practice Doctorate in Nursing which calls for a change in the minimum education requirement for APRNs to be increased from a masters degree to a practice doctorate by the year 2015 (AACN, 2004).

The Institute of Medicine (IOM) report (2010), sited recommendations that seek significant improvement in public and institutional policies at national, state, and local levels. The development of the DNP program will increase the number of primary care providers and experts in health care system design, finance, and policy development available to residents of Hawai`i. On the Big Island, there are only 76 APRNs (State of Hawai`i Board of Nursing Report, October, 2009). This is one of the lowest ratios of APRNs per capita in the U.S. (one (1) APRN per 2,252.5 residents of the Big Island). In 2009, the Governor of Hawai`i signed legislation deeming APRNs as "primary care providers." This legislation grants Hawai`i's APRNs global signature authority, allowing access to full prescriptive authority, medical equipment, and therapeutic regimens. APRN joint formulary authority was moved to the Board of Nursing, providing the flexibility to remove any requirement for a "collegial or supervisory" relationship with a physician. Twenty five of the 50 states allow APRNs to practice without the supervision of a physician. DNP graduates will also be given the opportunity to focus on nurse leadership and organizational systems skills positioning them for service in administrative leadership, research, clinical care delivery, patient outcome and systems management roles.

Much attention has been focused on the health care system in its attempt to treat a complex aging population while facing a predicted nursing shortage. The National League for Nursing (NLN) reports a direct correlation between the nursing shortage and the lack of adequate numbers of nursing faculty to teach our future nurses (NLN website, 2009). Unfortunately this shortage is expected to increase, with 1 in 5 nursing faculty members facing retirement in the next five years (NLN website, 2009). In addition to increasing the number of primary care providers available to residents of Hawai`i, the DNP graduates will serve as a pool of qualified nursing faculty candidates able to address the severe faculty shortage.

The creation of a DNP program at UHH SON will improve the nursing education pipeline here in Hawai`i. Of UHH SON BSN graduates, 18-35 percent plan to pursue advanced practice (DNP education) within one to three years of obtaining the BSN. For example, of the 28 May 2009 BSN graduates, four (4) immediately entered graduate studies. Because UHH SON offers no graduate program options students interested in advanced degrees must leave the Island to pursue their academic goals at UH Manoa, Columbia, and Oregon Health Sciences Center. The UHH SON currently has an educational pipeline allowing nursing graduates from the community college associate degree (ADN) programs to complete the baccalaureate degree via online

classes and clinical sites on Hawai`i Island as well as on the Islands of Maui and Kaua'i. In a 2008 survey of Hawai`i associate degree (ADN) and baccalaureate nursing program graduates, 20.2 percent of respondents indicated that a major factor that has prevented them from obtaining a higher education in nursing is that advanced degrees in nursing are not available locally (UH Hilo Department of Nursing, 2006). A post-baccalaureate DNP will allow graduates of baccalaureate nursing programs to seamlessly enter an advanced degree program at UHH SON. In addition, APRNs who have already graduated from masters in nursing programs will have the means to complete the DNP at the post-masters level. The addition of the DNP would expand the pool of UHH SON applicants, create a seamless pipeline from pre-nursing licensure to the terminal professional DNP degree, facilitate selection of those candidates who are academically prepared for the rigors of nursing education programs, and allow for greater diversity or geographic distribution throughout the state of Hawai`i HRSA (2008).

After conducting an island wide survey of interest for the DNP the UHH SON anticipates accepting an initial cohort of 10 students. Currently, the nursing department at UHH SON has six (6) faculty members who are certified APRNs and qualified to teach the clinical advance practice course work. There are an additional four (4) faculty who are qualified to teach the non-clinical course work within the DNP. Since the BSN program is small (by state and national standards), reallocation of faculty resources will have minimal impact on the BSN program. Additional faculty members for DNP courses will be supplemented by visiting scholars/adjunct faculty/lecturers for core courses thereby enriching the current BSN program. In addition to utilizing current faculty, creation of the DNP program will require one (1) additional full-time faculty member to be added for each of the first three (3) years of implementation of the program and adjunct lecturers.

The DNP program has been planned as an online course of study. Select online courses will be augmented with executive model (intensive format) didactics. This format will increase the quality of the program due to the ability to recruit a variety of nursing educators who are active experts in their fields. The online and executive model courses will accommodate students who reside on other islands or on the mainland.

No additional physical classroom or faculty office resources will be needed for the UHH SON faculty. The program will make use of existing faculty offices and classrooms. Utilization of an executive model allows for utilization of existing BSN facilities during periods of lower utilization. The community is the laboratory in a DNP program thus student experiences will occur in clinics, hospitals, and rural health care and community settings.

This program will be funded by tuition revenues. Program planning costs were funded by a Special BHPr Congressional Initiative Health Resources & Services Grant. The BHPr Congressional Initiative Health Resources Grant funding received, totaling $383,130, is being utilized to assist with the development and implementation costs. Due to the receipt of this HRSA planning grant and significant support from Senator Daniel Inouye's office, for creation of this proposed program, UHH SON will be a solid candidate for receipt of a HRSA Advanced Nursing Education Program Grant. Senate Appropriation funding through HRSA was allocated

to UHH SON for 2010 for $350,000 to assist with the development of this proposed program. Additional funds may be possible through HRSA /American Recovery and Reinvestment Act (ARRA), DHHS/HRSA Division of Nursing Graduate Student Traineeships, Helene Fuld Health Trust, and Johnson and Johnson. Traineeships are provided by the DHHS/HRSA Division of Nursing for DNP students. These traineeship grants occur on an annual basis.

President Greenwood identified the need to meet "Hawai'i's crucial workforce needs, generating jobs, and contributing to a brighter economic future" as a key initiative to ensure a strong educational and economical future for Hawai`i. The creation of a DNP program at UHH SON addresses the initiative outlined in The University of Hawai'i for the 21st Century by:

(1) improving local student's access to higher education– currently there are no DNP programs available to students in the state of Hawai`i, forcing potential students to pursue DNP studies at universities on the mainland.

(2) increasing the "range of opportunities for our students" -currently there are no programs in Hawai`i that will prepare APRNs to meet the increasing educational requirements set forth by the AACN to attain the highest practice degree, the DNP by 2015.

(3) contributing to Hawai`i's overall economic future by creating an innovative program that meets educational and health care needs of our Hawaiian Communities.

Mission

The DNP is a program designed to prepare the nurse at an advanced level of nursing science. The program emphasizes the development of the student's capacity to impact the clinical setting as leaders and educators and to utilize clinical research to improve and transform health care. The DNP program is based on the understanding that nursing provides services which include the direct care of individual clients and especially the elderly clients, transcultural nursing, management of care for rural populations, administration of nursing systems, and development and implementation of health policy. In addition, the program will encompass health economics, cultural diversity, chronic care management, health promotion, and disease prevention in rural communities and will create a cadre of new nursing faculty who can immediately address the nursing faculty shortage. DNPs who are also APRNs will address significant practice issues in a scholarly way, adopt broad system perspectives for health promotion and risk reduction, and act as agents of change that transform client/community care, participate in the on-going evaluation of health care outcomes, and assist in the translation of research that leads to positive nursing practice changes.

Nursing Philosophy

The philosophy of UHH SON is to educate professional nurses to lead change and translate science into practice in a dynamic global health care environment. Our school promotes transcultural nursing with a focus on rural populations and communities where each person has the right to participate in making decisions that affect their health.

We emphasize the need to deepen our commitment to social justice, improve the quality of health care, and access to the underserved. Our vision is a world where our graduates will strive to promote health, alleviate suffering, provide service to the community, and become leaders at local to global levels.

Foundational Aspects of the UHH SON DNP Program

The DNP program was designed based on the AACN DNP Essentials. Program goals and program learning outcomes were derived from the Essentials and the needs of the community and the students in conjunction with the rural and transcultural strengths of the UHH SON.

American Association of Colleges of Nursing (AACN) Essentials

1. Scientific Underpinnings for Practice
2. Organizational and Systems Leadership for Quality Improvement andSystems Thinking
3. Clinical Scholarship and Analytical Methods for Evidence-BasedPractice
4. Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care
5. Health Care Policy for Advocacy in Health Care
6. Interprofessional Collaboration for Improving Patient and Population Health Outcomes
7. Clinical Prevention and Population Health for Improving the Nation's Health
8. Advanced Nursing Practice

From the DNP Essentials proposed by the American Association of Colleges of Nursing (AACN), ANA position paper.

DNP vs PhD Contrast Grid

	DNP	PhD
Program of Study	Objectives Prepare nurse specialists at the highest level of advanced practice Competencies See AACN Essentials of the DNP (draft 2006)	Objectives Prepare nurse researchers Content See Indicators of Quality in Research-Focused Doctoral Program in Nursing (2001)
Students	Commitment to practice career Oriented toward improving outcomes of care	Commitment to research career Oriented toward developing new knowledge
Program Faculty	Practice doctorate and/or expertise in area in which teaching Leadership experience in area of specialty practice High level of expertise in specialty practice congruent with focus of academic program	Research doctorate in nursing or related field Leadership experience in area of sustained research funding High level of expertise in research congruent with focus of academic program
Resources	Mentors and/or precepts in leadership positions across a variety of practice settings Access to diverse practice settings with appropriate resources for areas of practice Access to financial aid Access to information and patient-care technology resources congruent with areas of study	Mentors and/or precepts in research settings Access to research settings with appropriate resources Access to dissertation support dollars Access to information and research technology resources congruent with program of research
Program Assessment and Evaluation	Program Outcomes Health care improvements and contributions via practice, policy change, and practice scholarship Receives accreditation by specialized nursing accreditor Graduates are eligible for national certification exam	Program Outcomes Contributes to healthcare improvements via the development of new knowledge, and other scholarly products that provide the foundation for the advancement of nursing science Oversight by the institution's authorized bodies (i.e., graduate school) and regional accreditors

Program Goals

The goals of the DNP Program at the UHH SON are to:

1. Provide doctoral level education utilizing scientific knowledge and clinical research of populations that is required for safe nursing practice in hospitals and communities and which addresses the growing concerns regarding the quality and safety of patient care and delivery.
2. Conduct community based research aimed at engaging community members to address health needs and concerns, health care finance, and policy development within a transcultural framework.
3. Educate and train primary health care providers (Family Nurse Practitioners) who are grounded in community in population-based health care and health promotion.
4. Educate and train graduates to address health disparities and improve community capacity in rural settings.
5. Provide and develop organizational and leadership management skills to strengthen practice and health care delivery.
6. Provide education in health care policy, development, and education.
7. Participate in interdisciplinary collaboration for improving patient and population health care outcomes.

These goals are derived in part from the DNP Essentials proposed by the AACN, ANA position paper.

Program Learning Outcomes

Upon successful completion of the DNP, students will demonstrate the ability to:

1. Synthesize theoretical knowledge and research evidence in designing primary care delivery for diverse populations across the lifespan in rural contexts.
2. Collaborate with multidisciplinary professions, multisectoral agencies, and lay communities to influence social and health policies impacting rural population health.
3. Assume leadership roles in organizational systems to improve rural population health in local and regional communities.
4. Promote adherence to professional and ethical-legal standards of practice by individual professionals and organizations.
5. Integrate cultural competence and social justice in addressing health disparities in rural populations.

6. Examine research evidence in design and implementation and evaluation of policies and programs for population health in rural communities.
7. Use best practices and technology to improve care delivery for diverse individuals, families and communities within the continuum of primary, secondary, and tertiary care.
8. Create educational programs to develop culturally competent practice and education of the nursing workforce.
9. Design educational programs and evaluation programs to enhance rural community empowerment for health.

Program Justification

The development of the DNP program will increase the number of primary care providers and experts in health care system design, finance, and policy development available to residents of Hawai`i. On the Big Island, there are only 76 APRNs (State of Hawai`i Board of Nursing Report, October, 2009). This is one of the lowest ratios of APRNs per capita in the US (1 APRN per 2,252.5 residents of the Big Island). Legislation has been signed deeming APRNs as "primary care providers." This legislation grants APRNs in Hawai`i with global signature authority, including prescriptive authority, medical equipment, and therapeutic regimens. With this current legislation in place, APRNs will be crucial in meeting the Big Island's primary care provider shortage.

In addition to increasing the number of primary care providers available to residents of Hawai`i, DNP graduates will also create a pool of qualified nursing faculty candidates to address the severe shortage. Much attention has been focused on the grim realities that health care faces due to the current nursing shortage, which is expected to worsen in the next three (3) years. The National League for Nursing (NLN) reports a direct correlation between the nursing shortage and the lack of adequate numbers of nursing faculty to teach our future nurses (NLN website, 2009). Unfortunately this is also a shortage that is expected to increase, with 1 in 5 nursing faculty members facing retirement in the next five (5) years (NLN website, 2009). The creation of the DNP program will help add qualified applicants to the nursing academic workforce.

http://www.nln.org/governmentaffairs/pdf/Finance%20CommitteeTestimony.pdf

Creation of a DNP program will meet the increasing educational requirements for APRNs that are set for 2015. Currently a master's prepared nurse can enter into an APRN position. In 2004, the AACN endorsed a *Position Paper on the Practice Doctorate in Nursing* which calls for a change in the minimum education requirement for APRNs to be increased from a masters degree to a practice doctorate by the year 2015 (AACN, 2004).

The development of the DNP option will facilitate advanced scholarly inquiry as to best clinical evidence-based practices to meet the unique needs of rural and underserved communities which will result in more cost effective treatment approaches, prevention methods, technology systems,

and health delivery modalities. Registered nurses working in rural areas are less likely to hold advanced degrees compared with urban counterparts, with implications for lack of nursing leadership in both rural hospitals and rural community health centers (Rural Health Research Center, 2007).

http://depts.washington.edu/uwrhrc/uploads/RHRC%20FR115%20Skillman.pdf

Student Demand

Needs Assessment Survey / Doctorate of Nursing Practice Program

In June 2010, the UHH SON distributed an assessment survey to Registered Nurses (ADN, BSN, APRN) licensed in the State of Hawai'i and living on the Island of Hawai'i. The nurses currently working at local hospitals, community health centers and private health care provider offices were mailed or hand-delivered a four page survey with an explanatory cover letter and a DNP fact sheet. The purpose of the survey was to determine interest in the DNP or interest in graduate education.

Distribution

Local Hospitals included: Hilo Medical Center, Kona Community Hospital and North Hawai'i Community Hospital. **Community Health Centers include**: Pahoa Family Health Center, Kea'au Family Health Center, Ka'u Family Health Center, Hilo Bay Health Center, Waimea Women's Center and Various Professional Nursing Conferences.

The key points of the survey are below:

Out of the 325 surveys distributed, 139 were returned (43%). Of the respondents, 28% reported that they would be interested in pursuing a Doctor of Nursing Practice degree.

Survey of DNP Interest.

Rate of Return	Distributed	Returned	Rate of Return
Distributed	**325**	**139**	**43%**
Expressed Interest in DNP		**39**	**28%**

The survey indicates that in the State of Hawai'i and specifically the island of Hawai'i there is a need to prepare nurses at the DNP level. Such an educational endeavor could meet the practice demands of the increasingly complex and rural health care system facing the island of Hawai'i. The future demand for DNP prepared nurses will be great. In order to meet the needs in education and the health care system we will need to increase the state's capacity to prepare more nurses at the UHH SON at the DNP level. The following tables highlight responses from the survey.

Are you interested in teaching in a nursing academic program?

Interest in Teaching	Respondents	Percent of Respondents
Yes	65	47%
No	69	50%
Responses	134	
No Responses	5	
Total	139	

Interested in pursuing the Doctor of Nursing Practice degree.

Interest in DNP Program	Respondents	Percent of Respondents
Yes	39	28%
No	57	41%
Uncertain	36	26%
Responses	132	
No Responses	7	
Total	139	

If yes,

Within 5 years	27	48%
Within 10 years	8	14%
Uncertain	21	38%
Total Responses	56	

Preference is for part-time study	31	57%
Preference is for full-time study	11	20%
Uncertain	12	22%
Total Responses	54	

University of Hawaii at Hilo BSN Junior Class DNP Survey

The survey was distributed to the junior class of BSN students attending UHH SON. The following summarizes key points of the survey:

In the data, 93% of the juniors surveyed were interested in teaching in a nursing academic program, and 58% were interested in enrolling in a DNP program, of which 73% would enroll within five years.

Of 28 surveys distributed, 26 were returned or 93% of the total.

Rate of Return	Distributed	Rate of Return
Distributed	28	
Returned	26	93%

1. Zip code of current residence.

Residence	Respondents	Percent of Respondents
96720 to 96778 (Island of Hawai`i)	25	96%
96743 (Oahu)	1	4%
Total Responses	26	

2. Are you interested in teaching in a nursing academic program?

Interest in Teaching	Respondents	Percent of Respondents
Yes	13	50%
No	13	50%
Total Responses	26	

3. Interested in pursuing the Doctor of Nursing Practice degree.

Interest in DNP Program	Respondents	Percent of Respondents
Yes	15	58%
No	3	12%
Uncertain	8	31%
Total Responses	26	

If yes,

Within 5 years	**16**	**73%**
Within 10 years	**4**	**18%**
Uncertain	**2**	**9%**
Total Responses	**22**	

Preference is for part-time study	**6**	**27%**
Preference is for full-time study	**9**	**41%**
Uncertain	**7**	**32%**
Total Responses	**22**	

As evidenced by the above survey data, there is a demand for a DNP program. As evidenced in the supporting documents and survey data, this degree program meets the professional, occupational, economic, educational, and social needs of rural Hawai`i.

Market Analysis

The market analysis prepared for the UHH SON supports the DNP program in the following ways: 1) provides justification of the program based on the AACN position paper and the national shortage of primary care providers ; 2) supports the assumption that DNPs in a primary care role provide culturally relevant and cost effective care; 3) documents the shortage of primary care providers on the Island of Hawai`i; and 4) offers potential job opportunities and salary ranges using national trends.

The Doctor of Nursing Practice provides expert primary care providers to address the shortage of primary care providers and nursing faculty

AACNs (2004) Position Statement on the Practice Doctorate in Nursing supports the transition from specialty nursing practice education at the master's level to the DNP by the target goal of 2015.

"A trend in nursing education that has served to increase the demand for doctoral prepared nurses with expertise in nursing practice is the tremendous shortage of faculty. As was predicted by Berlin (2002) faculty shortages, which are already seriously compromising the discipline's ability to respond to the shortage of bedside nurses, are expected to worsen as more and more faculty reach retirement age. Unfortunately, the enrollments in and graduations from PhD programs in nursing have remained quite steady, so are insufficient to replace the number of faculty who are scheduled to retire in the near future. A practice-focused doctorate appeals to a sizable number of master's-prepared, experienced, and expert clinicians who desire the doctoral credential that many universities recommend or require for their faculty, but who do not wish to pursue a research-focused doctoral degree."

"As the debate on overhauling the nation's health-care system exploded into partisan squabbling this week, virtually everyone still agreed on one point: There are not enough primary-care doctors to meet current needs, and providing health insurance to 46 million more people would threaten to overwhelm the system. "Ashley Halsey III, Washington Post Staff Writer, Saturday, June 20, 2009

Job Market Analysis

DNPs are Expert Providers of Culturally Competent Care for Diverse Populations

The island of Hawai`i (Hawai`i County), has the highest Ethnic Diversity Index in US = 0.77

"Cultural competence is defined for our purposes as the attitudes, knowledge, and skills necessary for providing quality care to diverse populations (The California Endowment, 2003). Becoming culturally competent is an ongoing process in which an individual or organization develops along a continuum until diversity is accepted as a norm and the nurse has acquired greater understanding and capacity in a diverse environment (O'Connell, Korner, Rickles, &Sias, 2007; Sias, 2004).AACN, 2009

(http://www.aacn.nche.edu/Education/pdf/CulturalComp.pdf)

The Doctor of Nursing Practice provides expert primary care providers who deliver quality cost-effective care to address the shortage of primary care providers in Hawai`i. The State of Hawai`i now recognizes the Advanced Practice Nurse as a primary care provider.

Scientific knowledge and clinical practice will be advanced with evidence based practice in these high need areas. Utilizing culturally tailored researched interventions to enhance self-management of these health concerns is an enormous need for this population. The effect of studies in this population will expand knowledge of how and whether self-management works for this multi-ethnic, rural, underserved area and contribute to the science of technologies, treatment, or preventive interventions in this arena.

The island of Hawai`i has higher risks indicators of several chronic disease conditions (Table 1) and shows higher socio-economic risk indicators compared with the state of Hawai`i overall (Table 2). (Hawai`i Dept. of Health, 2007)

Table 1. Chronic Disease Health Risk Indicators, 2002-2006: Hawai`i Dept. of Health, 2007

	Estimated Annual Percent of Adults with Diabetes	Estimated Annual Percent of Adults who are Obese	Estimated Annual Percent of Adults who smoke	Stroke Mortality Rate(per 100,000age adjusted)	CHD Mortality Rate (per 100,000 age adjusted)
State	7.2%	19.0%	18.0%	94.8	66.5
Hawai`i	7.2%	20.3%	19.7%	114.0	135.1
Hilo	7.5%	20.3%	21.0%	164.6	155.0
Puna	6.4%	20.3%	21.4%	164.6	152.8
Ka'u	9.1%	24.4%	23.0%	139.9	138.1
S Kona	9.0%	18.5%	19.2%	115.3	154.9
N Kona	4.5%	18.3%	16.5%	90.9	100.2
S Kohala	5.0%	17.9%	16.9%	125.9	119.5
N Kohala	9.8%	22.0%	22.0%	73.1	88.3
Hamakua	11.7%	21.1%	17.3%	112.3	106.2

Table 2. Socio-Economic Risk Indicators: Hawai`i Dept. of Health, 2007

	Population <200% of Poverty (1999)	Population Age 65 and Over (2000)	Civilian Unemployment Rate (2007)	Adults Without HS Diploma (2000)	Financial Aid (2007)	Food Stamps (2007)
State	25.9%	13.3%	2.6%	15.3%	2.1%	11.1%
Hawai`i	34.5%	13.5%	3.3%	16.1%	3.4%	17.9%

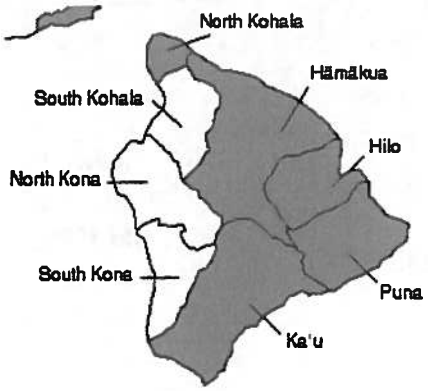
Areas of Primary Provider Shortage

The Hamakua, Hilo, Puna, and Ka`u regions are listed as Federally Designated Medically Underserved Areas/Medically Underserved Populations (MUAs/MUPs). The Location of Service Areas with Combined Risk Scores are North Kohala, Hamakua, Hilo, Puna, and Ka'u. Waikoloa, Puna, and Ka`u are also designated Primary Care Health Professional Shortage Areas (HPSAs) (Hawai`i Dept. of Health, 2007).

Figure 1. Federally Designated Medically Underserved Areas/Medically Underserved Populations

Figure 2. Primary Care Health Professional Shortage Areas

Figure 3. Service Areas with Combined Risk Scores



Example job market analysis for DNPs / earning potential

A market analysis survey conducted by the University of Kentucky College of Nursing prior to opening their DNP program showed that potential employers of these graduates in that state were very interested in hiring nurses with this level of preparation. In Fall 1999, a questionnaire was mailed to 382 top executives in acute, long-term, and public health care settings in Kentucky. A total of 111 responses were received for a response rate of 29%. Sixty-eight respondents (61%) indicated they would be interested in hiring graduates of this program and estimated they would have within the next five years a total of 80 positions available for graduates of this program (University of Kentucky College of Nursing, 1999).

Examples of the positions for which respondents would hire graduates included:

Vice President for Clinical Services

Program Director, Vice President for Patient Care

Chief Executive Officer

Health Officer or Commissioner

Quality Improvement Director

Director of Clinical Services

Clinical Information Technology Specialist

Direct Care Clinician

Faculty Member

Job market for DNPs / earning potential

	Nursing Salary Range		
Advanced Practice Nursing Category	**25th Percentile**	**Median**	**75th Percentile**
Certified Nurse Anesthetist (CRNA)	$135,388	$145,216	$155,415
Certified Nurse Midwife	$81,557	$89,337	$96,097
Clinical Nurse Specialist (CNS)	$74,545	$80,975	$88,168
Nurse Practitioner (NP) and Family Nurse Practitioner (FNP)	$75,838	$82,590	$89,392

(from www.allnursingschools.com/nursing-resources/salaries)

DNP Program Overview

The extraordinary intellectual, biological, and cultural diversity on the Island of Hawai`i represents foundational aspects of the program. Additional aspects include a focus on rural health promotion, policy and leadership. Students will be prepared for roles in clinical practice, education, and health care leadership emphasizing delivery and design of primary health care for diverse populations across the lifespan within a rural context.

The curriculum is designed to provide students with conceptual knowledge and practical experience balancing core didactic courses with clinical practice and leadership opportunities culminating in a practice inquiry project. The curriculum is based on the AACN Essentials of Doctoral Education for Advanced Practice Nurses. Students will participate in lectures, seminars, laboratory simulations, and site visits to rural communities. Research methods and evidence based practice provide opportunities for data analysis, research critique, evidence–based presentations, and formulation and evaluation of a practice inquiry project. At the conclusion of the program, all students will demonstrate competence in the eight essentials of doctoral education, be prepared for their specialty role as an individual health care provider, and be trained for leadership roles within the larger health care system.

The delivery of the DNP program is primarily on line with periodic planned face-to-face experiences in the form of intensive sessions in executive format. Since 2004, UHH SON has offered courses using online formats through the on-campus BSN and online RN-BSN programs.

DNP Program Entry Points

Students have two program entry points to earn the DNP degree.

- The Post Baccalaureate DNP entry point is intended to allow entry into the DNP program for nurses who are not already APRNs. The program will educate registered nurses to be Family Nurse Practitioners (FNP) with foci in gerontology, Transcultural Nursing, and Rural Health Care.

- The Post Masters DNP entry point offers nurses with advanced degrees in nursing specialty areas (e.g. education, administration, practice, information systems management, leadership etc.) a doctoral program which expands their level of practice expertise.

Both the post-BSN and the post-MSN programs will culminate with the award of DNP with an emphasis on clinical practice and leadership.

Admissions

Requirements for Advanced Degrees-Candidates for Doctoral Nursing Practice

Admission to Doctorate of Nursing Practice Program

1. Degree requirement: Bachelors or Masters Degree in nursing from a program accredited by a national organization (NLNAC or CCNE) responsible for nursing accreditation.
2. Official Transcripts from every college/university attended Grade Point Average (GPA). Only applicants with cumulative GPA >3.0 based on all collegiate work or cumulative GPA of >3.2 earned during applicant's most recently completed degree program will be considered for admissions.
3. RN License, a copy of currently-held, unencumbered Hawai'i RN license, or currently-held unencumbered authority-to-practice as RN via multi-state licensure compact, or RN license from another state, if all clinical work during academic program will take place in that state.
4. Recommendation forms, two recommendation forms should be completed by faculty members who can address your academic ability and one recommendation form should be completed by an employer or professional who can address your professional performance.
5. Current basic life support (CPR certification).
6. Professional Goals Essay which describes career goals and interest in graduate study.
7. An on-campus or telephone interview is a required part of admission process.
8. Successful background check and drug test must be completed prior to enrollment.
9. Evidence of current immunizations and negative TB test result (less than 1 year old) or negative chest X-ray.

Beginning the Program

Upon admission to the program, the chair of the graduate program appoints a faculty advisor or graduate committee (whose chair is the principal academic advisor). The initial advisor assists the student in planning coursework and in understanding the program structure and requirements; the advisor has primary responsibility for monitoring the progress of the student's work. The advisor may or may not become the student's graduate committee chair for the practice inquiry project. The initial advisor should meet with the student at least once each semester.

Requirements for a doctoral degree

1. Maintenance of at least a B average in courses approved by the program's graduate committee and presented for the degree.

2. Fulfillment of all program course requirements (no credit is granted for graduate courses in which a grade lower than B- has been received).
3. Completion of at least 24 credit hours in residence regardless of any previous graduate coursework elsewhere. **Students continuing their studies for a doctoral degree in the same UH Hilo program from which they earned their masters' degree need not fulfill a second residence requirement.**
4. Continuous registration including the semester in which final degree requirements are completed (this does not include summer terms).
5. Successfully complete Practice Inquiry Project:
   - Complete practice fieldwork in a clinical area related to the topic of interest.
   - Synthesize knowledge and skills obtained in didactic and integrative courses in order to address the ethical, legal, transcultural, financial, and organizational aspects of the scholarly project.
   - Formulate community based participatory research proposal and submit individual objectives for approval of the project at the beginning of the semester.
   - Implement and evaluate the impact of the practice inquiry project.
   - Disseminate findings through an oral presentation and a manuscript suitable for a peer-reviewed publication.

Course List with Descriptions

NURS 518 Environmental Epidemiology, & Statistics (3 credits)
Exploration of concepts and quantitative techniques used in modern epidemiology,
As well as the health effects associated with selected environmental exposures of the general population. The course emphasizes the analytical studies, quantitative measures of association, and critical readings of current literature. The approaches of epidemiology in estimating the burden of disease, and in evaluating primary, secondary and tertiary prevention strategies are presented.

NURS 501 Transcultural Determinants of Care (3 credits)
Examination of the complex interactions among the physical and social environment, health status, education, culture, and human capital in urban and rural communities. A multidisciplinary focus on the quality of life as the outcome of micro and macro –determinants and consequences of health that operate at the individual, family, neighborhood, community, nation, and global levels of sociopolitical and community organization.

NURS 502 Information Systems/Technology (3 credits)
Overview of resources of the emerging health information age. The course will focus on 1) the theory and conceptual base for health care information systems and technology, 2) design selection, and application of current and developing health information technology applications and 3) approaches to evaluate the effectiveness of health information systems used in patient care and education.

NURS 503 Advanced Clinical Pharmacology (3 credits)
Focus on the pharmacotherapeutic principles of drugs most commonly used by advanced practice nurses. Emphasis on the process of selecting appropriate agents for therapy, and monitoring adverse drug reactions or interactions with prescription., over-the-counter, and alternative therapies. Emphasis on integration of pharmacy, physiology, and physical assessment in developing evidence-based primary clinical management skills for patients across the lifespan with regard to their medication use. Foundations of prescriptive authority will be addressed.

NURS 504 Advanced Clinical Pathophysiology (3 credits)
Introduction to the use of pathophysiology of body systems to support clinical decision making of the advanced practice nurse in management of common acute and chronic diseases of children, adults, and older adults Overview of the mechanism (s) underlying disease and clinical manifestations so that rational therapies can be devised. Appropriate screening and diagnostic laboratory evaluative methods will be included. Examination of interrelated effects of genes, environment and lifestyle on patterns of disease in populations

NURS 505 Advanced Health Assessment (4 credits)
Focuses on the theoretical and clinical basis for assessment in advanced practice nursing. Demonstration of the process utilizing comprehensive physical, psychosocial, and cultural assessment across the lifespan, to gather specific data relevant to common health problems, and systematically determine differential diagnoses. Faculty and preceptors facilitate laboratory and clinical experiences in a variety of settings.

NURS 506 Rural Health Promotion (3 credits)
Focuses on the promotion of responsiveness of organizational health services to health needs of individuals and families in rural communities. Analysis of the impact of political, ecological, economic and cultural factors on community health in rural areas. Utilization of evidence-based process and collaborative leadership in designing structure of health promotion services to address rural community needs.

NURS 506L Rural Health Promotion L (3 credits)
Supervised advanced practice practicum focusing on health promotion and clinical management of the health concerns of adult clients as commonly encountered in diverse and rural primary

care settings. Emphasis on culturally-appropriate evidence-based practice, consultation, research, and evaluation. 3 semester hours supervised practicum (135 clock hours).

NURS 507 Primary Care of Adults (3 credits)
Course focus is primary care of adults with focus on health promotion, disease prevention and management of common acute, episodic and chronic health problems. Transcultural and biobehavior assessments used in diagnosis and evidence-based management of health problems, education, and evaluation of the care for the adult client in primary settings.

NURS 507L Primary Care of Adults L (3 credits)
Supervised advanced practice practicum focusing on health promotion and clinical management of the health concerns of adult clients as commonly encountered in diverse and rural primary care settings. Emphasis on culturally-appropriate evidence-based practice, consultation, research, and evaluation. 3 semester hours supervised practicum (135 clock hours).

NURS 508 Primary Care of the Older Adult (3 credits)
Building on the management of acute and chronic illness of the adult, this course emphasizes special needs of the older adult. The focus on quality of life will be supported utilizing theories of aging, management of complex chronic health problems, polypharmacy, dementia, and frailty. Evidence-based management plans incorporating transcultural and functional assessments are used to addresses issues of self-care, family care giving, surrogate decision making, and end of life care.

NURS 508L Primary Care of the Older Adult L (3 credits)
Supervised advanced practice practicum focusing on health promotion and clinical management of the health concerns of older adult clients as commonly encountered in diverse and rural primary care settings. Emphasis on culturally-appropriate evidence-based practice, consultation, research, and evaluation. 3 semester hours supervised practicum (135 clock hours).

NURS 509 Primary Care of Women (2 credits)
Didactic course focusing on the provision of comprehensive and culturally competent primary care to women. Emphasis on evidence-based health assessment, diagnosis, health education, health promotion, disease prevention, perinatal care, clinical management and evaluation of common gynecologic and obstetric primary health care needs of women as commonly encountered in diverse and rural settings.

NURS 509L Primary Care of Women L (2 credits)
Supervised advanced practice practicum focusing on health and wellness, perinatal and gynecologic aspects of care and occupational health concerns of women. Management of acute and episodic illnesses and chronic illness of the gynecologic and obstetric of women commonly encountered in primary settings. Emphasis on culturally appropriate evidence-based practice,

consultation, collaboration, referral, education, research, and evaluation. 2 semester practicum (90 clock hours)

NURS 510: Primary Care of Children (2 credits)
Didactic course focusing on the provision of comprehensive and culturally competent primary care to children. Emphasis on evidence-based health and developmental assessment, diagnosis, and health education, health promotion, disease prevention and the clinical management, and evaluation of health problems of infants, children, and adolescents as commonly encountered in diverse primary care settings.

NURS 510L: Primary Care of Children L (2 credits)
Supervised advanced practice practicum focusing on health promotion and management of common acute and chronic health conditions of infants, children, and adolescents. Emphasis on evidence-based health and developmental assessment, diagnosis, and health education, health promotion, disease prevention and the clinical management and evaluation of health problems commonly encountered in diverse and rural primary care settings. 2 semester practicum (90 clock hours)

NURS 511 Advanced Research Methods (3 credits)
This course focuses on the systematic examination and application of the qualitative, quantitative, and outcomes processes used in nursing research. The interrelationships among research theory, research ethics, and evidence-based nursing practice are explored. Uses of culturally appropriate research database tools consistent with specific patients or populations are included.

NURS 512 Evidence-based Practice (3 credits)
Focus on culturally appropriate evidence-based practice (EBP) used to produce best outcomes for diverse populations. Steps of the EBP process, implementation and evaluation of EBP, practical strategies, and information systems approaches are explored. Proposal development and writing for the final project to answer questions with specific clinical and culturally diverse populations are included

NURS 513 Program Development/Evaluation (3 credits)
This course builds on a completed evidence-based knowledge synthesis for a specific culturally diverse clinical target population/practice, students will identify and propose appropriate strategies for organizational/practice program development and evaluation. Students develop an innovative policy action plan for a population of interest based on an understanding of the cultural, financial, legal, and human resources needs of the health care environment.

NURS 514 Systems–based Leadership (3 credits)
Examination of leadership and management concepts used to address complex microsystem and macrosystem issues within selected health care organizations. Focus on the interrelationship of

selected roles within the context of specific theoretical frameworks and models of care. Based on these theories and models, the student will derive the DNP's role in complex health organizations. Emphasis is on the application of advanced communication skills in collaboration with interprofessional teams in working in collaborative interdisciplinary teams within complex health care organizations.

NURS 515 Health Policy: Local to Global (4 credits)
Exploration and analysis of health policy from the perspective of evidence development, analysis, and socio-economic impact within a socio-political context. The leadership role of the DNP in developing and implementing health policy is examined. Discussion of social justice and equity in access and delivery of health care services. Opportunities are provided to participate in the political processes impacting nursing and health care policy. Includes a cognate residency (90 clock hours).

NURS 516 Health Economics (3 credits)
Exploration of basic economic theory, market drivers and restraints, and cost/benefit analysis, and reimbursement. Theory and application are integrated with a focus on the role of the DNP in complex health care organizations, the delivery of health care in rural settings, and the DNP as entrepreneur. Issues of equity, fairness, ethics, and efficiency in health care resource allocation and management are explored.

NURS 517 Practice Inquiry/Project (6 credits)
Emphasis on the synthesis, critique, and application of evidence to support quality clinical or organizational practices in complex health care organizations. Students will implement an evidence-based clinical study or project on a topic of practice interest targeting a culturally diverse and vulnerable population, present an oral presentation of the study or project, and submit a scholarly paper from the study or project. Includes a cognate residency.

Elective (3 credits)
Graduate level cognates from nursing education, pharmacy, business, education, or social sciences as approved by DNP advisor.

Course Scheduling

University of Hawaii at Hilo
School of Nursing

Post-BSN to FNP/DNP Recommended Class Scheduling

Semester 1 (Fall Year 1)	Credits
Nurs 518 Environmental Epidemiology & Stat.	3
Nurs 501 Transcultural Determinants of Care	3
Nurs 502 Information Systems/Technology	3
Total	**9**

Semester 2 (Spring Year 1)	Credits
Nurs 503 Advanced Clinical Pharmacology	3
Nurs 504 Advanced Clinical Pathophysiology	3
Nurs 505 Advanced Health Assessment	4
Total	**10**

Semester 3 (Summer Year 1)	Credits
Nurs 506 Rural Health Promotion	3
Nurs 506L Rural Health Promotion L	3
Total	**6**

Semester 4 (Fall Year 2)	Credits
Nurs 507 Primary Care of Adults	3
Nurs 507L Primary Care of Adults L	3
Nurs 508 Primary Care of Older Adults	3
Nurs 508L Primary Care of Older Adults L	3
Total	**12**

Semester 5 (Spring Year 2)	Credits
Nurs 509 Primary Care of Women	2
Nurs 509L Primary Care of Women L	2
Nurs 510 Primary Care of Children	2
Nurs 510L Primary Care of Children L	2
Nurs 511 Advanced Research Methods	3
Total	**11**

Semester 6 (Summer Year 2)	Credits
Nurs 512 Evidence Based Practice	3
Nurs 513 Program Development/Evaluation	3
Total	**6**

Semester 7 (Fall Year 3)	Credits
*Elective	3
Nurs 514 System-Based Leadership	3
Nurs 515 Health Policy: Local to Global	4
Total	**10**

Semester 8 (Spring Year 3)	Credits
Nurs 516 Health Economics	3
Nurs 517 Practice Inquiry/Project	6
Total	**9**

Program Total: 73

Non-practice MSNs who wish to follow the FNP/DNP entry-point will follow the Post-BSN to FNP/DNP course schedule. Possible waivers of specific courses will be determined on a case by case basis.

University of Hawaii at Hilo
School of Nursing

Post-MSN to DNP Recommended Class Scheduling

Semester 1 (Fall Year 1)		Credits
Nurs 518	Environmental Epidemiology & Stat.	3
Nurs 501	Transcultural Determinants of Care	3
Nurs 502	Information Systems/Technology	3
Total		**9**

Semester 2 (Spring Year 1)		Credits
Elective		3
Nurs 514	System-Based Leadership	3
Nurs 516	Health Economics	3
Total		**9**

Semester 3 (Summer Year 1)		Credits
Nurs 512	Evidence Based Practice	3
Nurs 513	Program Development/Evaluation	3
Total		**6**

Semester 4 (Fall Year 2)		Credits
Nurs 515	Health Policy: Local to Global	4
Nurs 517	Practice Inquiry/Project	6
Total		**10**

Program Total: 34

DNP Practice Inquiry Project

UHH SON requires a Practice Inquiry Project for all DNP students; as the culminating course, emphasis is placed on the demonstration of knowledge synthesis in doctoral level nursing practice within the program outcomes. The practice inquiry project is a scholarly project designed to address a practice issue affecting groups of patients, health care organizations or health care systems. Students implement the practice inquiry project and evaluate outcomes of the project during the project residency. The practice inquiry project provides faculty the opportunity to evaluate students' achievement of program outcomes.

Students work with Graduate Committee in the implementation and evaluation of the project outcomes:

- Develop realistic timelines for project implementation, outcomes evaluation and completion of report with Graduate Committee
- Regular consultation with Graduate Committee throughout the project residency
- Submit progress report to Graduate Committee
- Satisfy ethical requirements for project implementation
- Select appropriate technology and resources for data collection, analysis and reporting
- Collaborate with multidisciplinary practitioners, multisectoral agencies and lay communities in comprehensive implementation and evaluation of project outcomes
- Update review of the literature
- Complete Practice Inquiry Project report and submit to Graduate Committee for approval
- Orally defend Practice Inquiry Project in the School of Nursing
- Present Practice Inquiry Project in Campus-wide colloquium
- Submit plan for wide dissemination of Practice Inquiry Project in scholarly publications or conferences

The practice inquiry project is guided by a Graduate Committee which the student is responsible for assembling. Each student will have a minimum of two readers for his/her examination. A candidate who fails the examination may request re-examination no earlier than the following semester in which the examination is offered. If the student fails to pass the examination on the second attempt, the student will be dropped from the degree program.

Student Learning Assessment

Program learning outcomes:
For the purpose of program assessment, a set of nine broad program learning outcomes have been developed. The successful DNP student will be able to:

1. Synthesize theoretical knowledge and research evidence in designing primary care delivery for diverse populations across the lifespan in rural contexts
2. Collaborate with multidisciplinary professions, multisectoral agencies and lay communities to influence social and health policies impacting rural population health
3. Assume leadership role in organizational systems to improve rural population health in local and regional communities
4. Promote adherence to professional and ethical-legal standards of practice by individual professionals and organizations
5. Integrate cultural competence and social justice in addressing health disparities in rural populations
6. Examine research evidence in design and implementation and evaluation of policies and programs for population health in rural communities
7. Use best practices and technology to improve care delivery for diverse individuals, families and communities within the continuum of primary, secondary and tertiary care
8. Create educational programs to develop culturally competent practice and education of the nursing workforce
9. Design educational programs and evaluation programs to enhance rural community empowerment for health

Typical course learning objectives:

Candidates for the DNP must present evidence of having met a number of specific performance objectives; each of these aligns with one or more of the nine program learning outcomes. These outcomes are found in various course syllabi.

1. Learn how to apply research findings (PLO1)
2. Examine theoretical perspectives on health of individuals and communities (PLO 1)
3. Incorporate best evidence in designing health promotion programs for rural populations (PLO 1, 9, 2)
4. Develop clinical competencies in advanced practice (PLO 1, 2, 4, 5)
5. Evaluate types and hierarchy of evidence (PLO 7,6)
6. Select appropriate approaches for organizational implementation and outcomes evaluation of Evidence based practice (PLO 9,1,6,7)
7. Develop a Practice Inquiry Project that meets the program outcomes (PLO 9)

Indirect Assessment:

The use of three (3) surveys to measure indirect evaluation is planned. One survey will be distributed to students at the end of the first year, where students will be asked to comment of the strengths and weaknesses of the program and to suggest improvements. The assessment committee will provide a mechanism of ongoing formative assessment by review of the survey and will present a report and recommendations for program improvement. As new recommendations are made and/or modified, as appropriate these will be implemented and assessed for effectiveness.

Students will complete the second survey during the last semester and a third summative evaluation survey will be sent to alumni graduates two (2) years after they have completed the DNP degree. The assessment committee will review the surveys and present a report and recommendations to the full faculty. Where actions are assessed in need of improvement in respect to program outcomes, they will be addressed and evaluated.

The UHH SON existing BSN program is approved by the National League for Nursing Accrediting Commission (NLNAC). Once approval from the Board of Regents is obtained the Commission on Collegiate Nursing Education (CCNE) will be notified of the intent to offer a DNP program. At that time, the intent for submitting the application for accreditation and a site visit during the first (year approximately AY 2013) will be planned.

Direct Assessment:

The progress of each student will be assessed and monitored throughout their academic experience through examinations, written reports, online and face to face participation, and other performances in each class. Additionally, assessment of program quality will be ascertained by student performances in signature assignments from select courses with progress towards examining at least two (2) or more program learning goals each year.

Systematic scheduled assessment of student achievement of program learning goals is the responsibility of all core faculty who teach program courses and those who advise the student practice inquiry project course work. A curriculum committee comprised of five (5) core faculty will review student work on the follow schedule:

Every January and May, results of these reviews will be reported to the faculty by the assessment committee with recommendation for specific changes in pedagogy/curriculum intended to address significant deficiencies. Modifications will be introduced and their effects monitored during the following academic year. The schedule below is tentative in terms of the specific courses and signature assignments to be included in program assessment. As the program is launched, it is anticipated that changes will need to be made to enhance the program.

Year	PLOs Addressed	Semester, Courses, and Signature Assignments
2012-2013	1, 5 2, 3, 5	NURS 501 NURS 506, 506L
2013-2014	6, 7 8,9	NURS 512 NURS 513
2014-2015	1-9	Practice Inquiry/Project

See the Following Rubrics:

Information Literacy Rubric, Graduate

	Documentation Conventions	Appropriateness of Sources	Evaluating Sources	Integrating Sources
Advanced	Mastery of citation format Error free use of citation format Consistent documentation of literature sources	Problem documentation is well supported from a multiplicity of sources. Retrieval of sources is consistent with hierarchy of evidence needed to accomplish project objectives	Sources strongly align with project objectives Interprets interdisciplinary sources to support project objectives	Synthesis of literature provides strong support for recommendations or conclusions Highly developed arguments or innovative solutions emerge from analysis of sources New knowledge or new understanding of existing information is generated Synthesis of the complexity of ethical or cultural issues are demonstrated
Competent	Consistent use of required citation format Minor errors in citation format In-text citations match bibliography	Multiple sources are incorporated but lack the strength to support the project objectives Nature and extent of information needed is sufficient.	Sources provide relevant information but do not fully support the project objectives Articulation of the sources is not compelling enough to support the project objectives	Synthesis of literature demonstrates moderate support for recommendations or conclusions Limited power to reach insightful conclusions Interpretation and analysis of sources lacks the specificity necessary to support the conclusions or achieve project objectives Ethical or cultural issues are addressed
Emerging	Inconsistent use of required citation format Inconsistent documentation of text citations in bibliography Persistent errors using required citation format	Opinions or non-empirical sources are used to support objectives of the project	Weak connection established between needed information and project objectives	Inconsistent connection between literature sources and argument Basic recognition of conflicting factors related to ethics or culture

Generalized Assesment Rubric for Scientific Writing

Score			Level
	Assesed Item	1 Emerging*	2 Developing
Style and Mechanics Score _____	Sentence Structure Effective	☐ Most are ineffective	☐ Some are ineffective
	Punctuation, Spelling, Grammar and Capitalization	☐ Filled with errors	☐ Several errors
	Paragraph Logical & Connected	☐ Ideas and statements disorganized within and between paragraphs	☐ Some well-organized thoughts; some paragraphs follow each other in logical order
	Journal style Guidelines Consistent	☐ Inconsistent	☐ Somewhat consistent
	Overall Writing Concise (Title, Abstract, Text)	☐ Verbose	☐ Somewhat concise
Ethics Score _____	Accurate Primary EBP Data	☐ Not accurately represented	☐ Somewhat inaccurate
	Citations of Others' Ideas and Methods	☐ Lacking	☐ Somewhat clear

*** Line Item Scoring: Emerging 1; Developing 2; Proficient 3; Insightful 4**

Name: _____

Date: _____

3 Proficient	**4 Insightful**
☐ Effective	☐ Highly effective
☐ Minimal errors	☐ Free of errors
☐ Effectively functions as a unit of thought; one major idea per paragraph; and paragraphs connected in a logical fashion	☐ Highly effective: never too long or too short, and always organized in a crisp and logical fashion
☐ Consistent	☐ Highly Consistent
☐ Concise	☐ Highly concise
☐ Accurate representation	☐ Accurate representation
☐ Appropriate	☐ Appropriate

Generalized Assesment Rubric for Oral Presentations

Score			Level
	Assesed Item	1 Emerging*	2 Developing
Content Score _____ Max. 20	**Significance Justified**	☐ Not Justified	☐ Not fully justified
	Reference to Others' Work	☐ Fails	☐ Inadequate
	Ideas or Synthesis Original	☐ Not Original	☐ Somewhat Original
	Represents Sophisticated Knowledge	☐ Much inaccurate	☐ Some inaccurate
	Relationship to Task/Audience	☐ Inappropriate	☐ Not entirely appropriate
Orginazation Score _____ Max. 20	**Logical and Clear**	☐ Not	☐ Somewhat
	Effective Slides	☐ Ineffective	☐ Some ineffective
	Clear Purpose	☐ Inaccurately stated	☐ Weakly stated
	Effective Time Management	☐ Poor overall ---does too much or too little	☐ Somewhat effective
	Balance of Time Allocation to Topic Areas	☐ Lacking	☐ Not always balanced
Delivery Score _____ Max. 20 Total: _____	**Student Comfort**	☐ Uncomfortable	☐ Somewhat poised, relaxed & comfortable
	Engagement of Audience	☐ Lacking	☐ Somewhat
	Clear and Concise	☐ Not	☐ Somewhat
	Effective Response to Questions	☐ Ineffective	☐ Somewhat effective

*** Line Item Scoring: Emerging 1; Developing 2; Proficient 3; Insightful 4**

Name: _____

Date: _____

3 Proficient	**4 Insightful**
☐ Justified	☐ Justified in sofisticated manner
☐ Satisfactory	☐ Fluently
☐ Original	☐ Highly original
☐ Accurate	☐ Accurate and highly sofisticated
☐ Appropriate	☐ Highly Appropriate
☐ Satisfactory	☐ Exceedingly
☐ Effective	☐ Extremely effective
☐ Clearly stated	☐ Clearly and precisely stated
☐ Effective	☐ Highly effective
☐ Effective	☐ Highly effective
☐ Poised, relaxed and comfortable	☐ Extremely poised, relaxed & comfortable
☐ Effective	☐ Extremely well
☐ Effective	☐ Exceedingly
☐ Effective	☐ Extremely Effective

Program Quality and Evaluation

The University of Hawai`i at Hilo has a seven-year cycle for program review, including external review. Units such as the UHH SON, who have external accreditation requirements, submit self-study reports to the VCAA (Vice Chancellor of Academic Affairs) that were submitted to their external agency in lieu of a report following UH Hilo's template. These reports are submitted to the VCAA on the schedule set by the external agency, the National League for Nursing Accrediting Commission. In addition, the UHH SON will contact the CCNE, the accrediting agency, for additional review and intent to plan an initial site visit after the second semester of implementation of the DNP program

In addition to professional accreditation, an advisory council will be established that consists of a DNP curriculum consultant, a community nurse leader, a community health center administrator, and a UHH SON Graduate council member. The advisory council will be a mixture of professional nurses and other professionals who can guide future endeavors related to program development, course content, policy development, guidance in practice inquiry projects relevant to the goals of the DNP program and faculty expertise, suggest research opportunities for faculty and students, and assist with program evaluation.

Discussion of Board of Regents Criteria

How This Program Will Support the Long-Range Academic Development of the University of Hawai`i at Hilo in relation to the criteria set by the Board of Regents (E5.201).

The primary mission of UH Hilo is to offer high quality undergraduate liberal arts and professional programs. Selected graduate degree programs are also offered where the need is documented and the university has strong expertise. *The University of Hawai'i for the 21st Century* brochure outlines President Greenwood's initiatives to ensure a strong educational and economical future for Hawai`i by "meeting Hawai`i 's crucial workforce needs, generating jobs, and contributing to a brighter economic future."
http://www.hawaii.edu /offices/op/2010/initiatives-brochure.pdf

The creation of a DNP program at UH Hilo addresses the mission of UH and the initiatives outlined in *The University of Hawai'i for the 21st Century* by:

(1) improving local student's access to higher education– currently there are no DNP programs available to students in the state of Hawai`i at this time participation in such a program would require students to move to the mainland to pursue studies,

(2) increasing the "range of opportunities for our students" currently there is no program in Hawai`i that will prepare APRNs to meet the increasing educational requirements set forth by the American Association of Colleges of Nursing by 2015 to attain the highest practice degree, the DNP.

(3) contributing to Hawai`i 's overall economic future by creating an innovative program that meets both our communities educational and health care needs.

The University of Hawai`i academic degree programs must remain competitive due to the rapidly changing areas of health care and its effects on professional degrees. The University of Hawai`i at Hilo Nursing Program, which currently offers a BSN, proposes to offer a DNP program.

Relationship to Other UH Programs

Hawai`i Community College Nursing Program

The DNP will expand the educational pipeline for Associate Degree nursing students considering an advanced degree in nursing and provide a new source of faculty and lecturers for the RN program within our local workforce and UHH graduates.

UHH BSN Program

The DNP will interface with the existing BSN program by providing an educational opportunity for working RN/BSN students seeking graduate education. Along with the RN-BSN option, the DNP provides a seamless continuation of education for those seeking advancement in the field of nursing. Advanced education at the DNP level will provide opportunities for financial compensation beyond the licensed registered nurse (RN) level by opening up new APRN roles in primary care and likely initiate innovative programming in transcultural nursing both here in Hawai`i as well as in international venues.

Relationship to UH Mānoa Proposed DNP

The UHH SON DNP program and the proposed UH Mānoa DNP program will provide two differentiated pathways leading to the DNP. UH Mānoa will offer a post-master's program to RNs with a master's degree in nursing or a related field. To meet the unique rural health needs for primary care providers on the Island of Hawai'i, UH Hilo proposes to offer both a post-baccalaureate and post-masters entry into the Family Nurse Practitioner DNP program that is grounded in transcultural care with a rural focus. The two programs will collaborate to strengthen the individual programs and create system level efficiencies. The programs have worked together to create a MOU (Appendix C) to guide efforts to jointly consult, share best practices, create opportunities for faculty exchange, and allow access into specific courses at each campus for students.

Social and Natural Science

The DNP curriculum encourages interdisciplinary education and supports student's endeavors to expand their knowledge base while building their program of study. Psychology and Pharmacy are among many departments within the UHH system in which DNP students may choose graduate level health care related elective courses. Such courses support the DNP coursework and interdisciplinary collaboration will enrich the core DNP courses on elderly populations,

evidence based clinical practice, health management, and health policy development for older adults.

Research Utilization

Use of research in making clinical practice decisions is a primary focus of the DNP role and thus is a predominate element of academic preparation in the DNP program. Therefore, a cadre of DNP graduates who have research skills and the ability to translate research into practice will be created. The impact of these DNP prepared nurses will be far reaching resulting in policies and practices that are informed by timely research based evidence. Moreover, the DNP graduates will increase the number of nurses with an appreciation for the importance of research, will use research in their practice and teaching, and will provide leadership to others in the area of research utilization.

DNP/PharmD

On September 28, 2010, Senator Daniel K. Inouye introduced S.3859 (Appendix D), which expresses the sentiment of the United States Senate concerning the establishment of a Doctor of Nursing Practice and Doctor of Pharmacy dual degree program. According to the bill, no current institution presently offers a DNP/PharmD dual degree but indicates UH Hilo as the institution exploring the option of offering this unique dual degree. S. 3859 has been referred to the Senate Committee on Health, Education, Labor, and Pensions.

Initiatives and Collaboration

Fall 2010, The University of Hawai`i at Hilo announced the launching of an important new initiative. The Rural Health Initiative will draw together physicians, pharmacists, nurses, and other health care providers to solve rural health problems in Hawai'i and throughout the Pacific by means of research, education, community service, and policy development. The endeavor will be based in the UH Hilo College of Pharmacy. The UHH SON will support the work of the initiative and collaborate with many partners in improving health care in our rural environment. Through the initiative, the UHH SON and specifically the faculty and students of the DNP program will have access to a biostatistian as well as access to other academic and clinical experts who will provide critical support for DNP education and research initiatives. This initiative will also provide a rich opportunity for interdisciplinary collaboration in education, research and practice. A $16 million federal Beacon Community grant, awarded for the purpose of implementing widespread use of health information technology in Hawai'i County is an additional resource for student learning and health care quality improvement. The UHH SON is supportive of the grant efforts and will participate in this endeavor.

Comparison to Similar Institutions

Currently there are 120 DNP programs nationwide. According to the AACN, an additional 161 DNP programs are in the planning stages. DNP programs are now available in 36 states plus the District of Columbia. The proposed tuition rate is in line with similar programs across the country. Typically, DNP post-BSN programs require between 73-91 credit hours of study (variations depend on focus of study and students' prior preparations) and DNP post-master's programs require between 29-40 credit hours. All DNP programs reviewed require a practice inquiry project.

Resources

Personnel: Faculty

In addition to utilizing current UHH SON faculty, creation of the DNP program will require one additional full-time (FT) faculty member to be added for each of the first three (3) years of implementation of the program. In addition to these added positions the program will require the use of adjunct faculty to meet the teaching needs of the program.

Use of adjunct faculty will fit in to the DNP program design due to the online and executive model courses (executive model courses are designed to allow intensive didactic sessions to minimize the need for students to travel to the island for face to face classes). The flexibility created by these program teaching modalities will enable recruitment of a variety of experienced nurse educators who are active experts in their field thereby increasing the quality of the program. In addition, by employing adjunct faculty for the program the cost of faculty salaries is reduced because adjunct faculty will be hired on a lecturer basis.

To visualize this savings, the following table from the DNP budget breakdown compares the costs associated with a FT faculty member vs. an adjunct/lecturer. A FT faculty member teaches 18 credits per year at approximately $82,600. This breaks down to $4,589 per credit hour for a FT faculty member. An adjunct faculty member will be paid $1,774 per credit hour (with a 3% inflation annually). This is roughly a $3,000 savings per credit hour.

Total Salary FT Faculty						
New Faculty 1	$82,600	$82,600	$ 85,078	$ 87,630	$ 91,136	$ 94,781
New Faculty 2	$ -	$82,600	$85,078	$87,630	$91,136	$94,781
New Faculty 3	$ -	$ -	$85,078	$87,630	$91,136	$94,781
Total	**$82,600**	**$165,200**	**$ 255,234**	**$ 262,890**	**$ 273,408**	**$ 284,343**
Total Salary PT Adjunct Faculty						
Number of credits taught	7	28	35	35	35	35
Step B rate	$1,774	$1,818	$1,873	$1,929	$2,006	$2,086
Total	**$12,418**	**$50,904**	**$65,555**	**$67,515**	**$70,216**	**$73,024**

Personnel: Administrative Support

The DNP program will increase the complexity of the UHH SON operations and will require the creation of an administrative officer position. The administrative officer will ensure smooth program operation and have the added responsibility of maintaining a strong applicant pool by disseminating important program information to the public and advising potential students about program options.

Current School of Nursing Faculty (See Appendix F for Faculty CVs)

Name	Rank	Current Activities	Graduate Faculty Status	Graduate Program Activity
Beck, Christine, APRN, FNP-BC, PHCNS-BC, CNE	Assistant Professor	Research & Adult Health, Review Practicum	Assistant Professor	Family NP, Public Health Clinical Nurse Specialist, Advanced health Assessment, Medical Anthropology
Brinkley, Jeff, APRN	Assistant Professor	Health Assessment, Skills & Concepts, Mental Health, Health Care Practicum & Review Practicum	Assistant Professor	Family NP, Health Promotion, Advanced Pathophysiology
Commendador, Kathleen PhD, APRN, WHNR BC	Assistant Professor	Health Assessment, Parent-Child Health Care Practicum, Parent-Newborn Care & Practicum, Collaborative Health Practicum	Assistant Professor	Family NP, Advanced Health Assessment, Primary Care of Women and Children
Daub, KatharynEdD, CTN-A, CNE	Professor & **Director**	Professor & Director	Professor & Director	Nursing Education, Transcultural Nursing, Systems-based Leadership and Management, Qualitative Research
Davis, Alice PhD, APRN	Assistant Professor	Adult Health & Practicum	Assistant Professor	Gerontology NP, Acute Care NP, Quantitative Research, Clinical Diagnostics/Differential Diagnosis
Flood, Jeanie, PhD (c)	Associate Professor	Parent-Child Health Care Practicum, Community Health Practicum & Collaborative Health Practicum	Associate Professor	Qualitative Research, Evidence-Based Practice, Pediatric Nursing
Lovell, Eileen, RN, MSN, PHN	Assistant Professor	Issues and Trends, Concepts and Skills Practicum, Community Practicum, Collaborative Practicum, Professional Writing	Assistant Professor	Information Systems, Public and Rural Health
Mukai, Cecilia PhD, APRN, FNP-BC	Professor	Concepts and Skills, Gerontological Health, Collaborative health Care & Practicum, BSN Review	Professor	Family NP, Gerontology, Advanced Health Assessment, Women's Health
Smith, Sarah, RN, MSN	Lab Coordinator	Parent-Newborn Practicum	Lab Coordinator	
Thompson, Joan, RN, MSN, APRN	Associate Professor	Heath Assessment, Parent-Child Health Care Practicum, Human Pathophysiology, Parent-Newborn Care, Community Practicum &	Associate Professor	Neonatal NP, Primary Care of Children, Advanced Pathophysiology, Rural Health

		Collaborative Practicum		Promotion
Tostenson, Lisa, RN, PHN, MSNed	Assistant Professor	Concepts and Skills & Practicum, Mental Health	Assistant Professor	Social Aspects of Health
Lecturers				
Ainsley, H, MHA	Lecturer	CEO Hilo Medical Center	Lecturer	Systems Based Leadership, Health Policy
Altman, Mary, PhD	Lecturer	Diversity and Culture	Lecturer	Health Policy: Local to Global, Social Aspects of Health, Culture and Healthcare Delivery
Campbell, Lisa, APRN	Lecturer	Adult Health, Community Health	Lecturer	Health Assessment, Adult Health, Older Adult Health
Curet, Lou, PhD, ARPN, FNP-BC, PhD, MBA	Lecturer	Community Health & Research	Lecturer	Information Management Systems, Health Economics, Statistics, Quantitative Research, Family NP
Fisher, Edward, PhD	Associate Dean	College of Pharmacy	Lecturer	Pharmaceutical Science
Kinney, Genevieve PhD	Lecturer	Mental Health & Transcultural Nursing	Lecturer	Transcultural Nursing, Qualitative Research, Systems-based Leadership and Management
Novak, Julie, PhD	Lecturer	Assoc. Dean for Practices and Clinical Director Schools of Nursing and Health Professionas	Lecturer	Social Aspects of Health, Systems Based Leadership and Management
Pacquiao, Dula, PhD	Associate Professor	Director of the Center for Multicultural Education, Research and Practice	Lecturer	Evidence Based Practice, Systems Based Leadership, Advanced Research Methods
Spector, Rachel, PhD	Lecturer	Transcultural Nursing Scholar	Lecturer	Social Aspects of Health, Transcultural Nursing
Squellati, Robin, APRN	Adjunct Faculty	Colonel, U.S. Air Force Corps, Former Detailee to the Office of U.S. Senator Daniel Inouye	Lecturer	Adult NP, Health Policy, Health Promotion

Physical Resources

No additional physical classroom or faculty office resources will be needed for the UHH SON faculty. A DNP faculty office will be provided by the College of Pharmacy in their annex or modular building until their new building is constructed. The program will make use of existing faculty offices and classrooms in the UCB. Utilization of an executive model with didactic courses offered in intensive format with on-line augmentation allows for utilization of existing BSN facilities during periods of lower utilization. The community is the laboratory in a DNP program. Experiences will occur in clinics, hospitals, and rural settings created for clinical experiences such as churches and schools. These settings will provide access to research populations for both faculty and students.

Current Equipment

The UHHSON already possess ample equipment to sustain the needs of this proposed DNP program. The following comprehensive list identifies the current equipment in the UHHSON laboratory:

(1) Classroom with a computer with Video/DVD capability with fifteen computers available for students' use

(6) Hill-Rom standard beds

(5) Non-computerized task specific models

(5) Teaching props/aides and supplies

(5) Intravenous poles (standard and electrical)

(6) Mobile Blood Pressure units

(5) Non-computerized mannequins

(1) Instructor-Driven Simulator (IDS) "SimMan®".

(3) Cardiac Monitors

(10) Physical Exam Kits (i.e. Stethoscope, otoscope, ophthalmic and funda scope)

Librarian Assessment

Program: Doctorate in Nursing Practice

Department, College: Nursing Department, College of Arts & Sciences

Faculty Member: Randy Y. Hirokawa, Dean CAS, Kay Daub, Chair & Professor Nursing

Librarian Completing Assessment: Amy Knehans/Pharmacy Health Sciences Librarian

The library will do an OCLC collection analysis to compare our library holdings with peer institutions so that we can evaluate our collection against other institutions that have a DNP program. The Nursing program will need to identify 3-5 peer institutions for bench marking purposes. This will help to determine what needs to be added to the collection and help estimate the costs of building an adequate collection to support the program. The Pharmacy/Health Sciences Librarian will also collaborate with other librarians that liaison to other Nursing DNP programs around the country to compare collections and to see what other assessments and evaluations of the collections have been done.

The Association of College and Research Libraries Guidelines for University Library Services to Undergraduate Students are used to make sure the library can provide adequate services to the programs. According to the guidelines the library must be staffed by 11 librarians and 19 support staff in order to support the new program. The library can support this program as long as it has the salary budget is reinstated.

The library currently absorbs all costs for Inter Library Loans and Intra System Loans. This will change in the future. The program will need funding to borrow materials that we do not own from other libraries to cover lending and copy right fees. Each UH department will be given a certain sum and responsible for payment after they have reached the limit. After the program has started ISL & ILL statistics can be looked at to identify additional titles that need to be added to the collection.

Assessment of the suitability of existing resources in Nursing.

Since there is an existing PharmD program many of the resources for this new DNP are already in place, but additions will be needed. The Library collection has a core monograph collection, journal collection and subscribes to several specialized databases that support the DNP program.

Library Monographs in the Health Sciences/Nursing: The library is spending an increasing proportion of its budget on resources in electronic format, including books. Electronic books are easily kept up-to-date and give patrons access from anywhere at any time. We currently have several ways to add electronic books to the collection. We have a subscription to StatRef with 5 concurrent users. It costs between $100-200 a title to add on two more users. This would be necessary if the program is interested in any of the current tiles we use. The nursing program can add on titles for their discipline. Titles vary in price from $100-$300 per title for 2 users. If the program were to purchase all nursing titles with 2 concurrent users it would cost about $8,000. I recommend the program to purchase 5-10 titles from this list and add on more users to several of the titles we currently have.

Nursing titles supplied by this vendor can be found here

http://www.statref.com/PDFs/TitlebyDiscipline.pdf

StatRef titles and cost are listed below.

Goodman & Gilman's Pharmacological Basis of Therapeutics Renewal $827.00

Handbook on Injectable Drugs Renewal $1,460.00

DSM-IV-TR - Diagnostic and Statistical Manual Renewal $438.00

Evidence-Based Pharmacotherapy Renewal $295.00

Harrison's Principles of Internal Medicine Renewal $1,421.00

Red Book: 2009 Report of the Committee on Infectious Diseases Renewal $621.00

Review of Natural Products Renewal $486.00

Merck Manual of Diagnosis and Therapy Renewal $216.00

Pharmacotherapy Handbook Renewal $549.00

Detailed Drug Information for the Consumer™ Renewal $338.00

Concepts in Clinical Pharmacokinetics Renewal $303.00

Current Consult Medicine 2007 Renewal $496.00

ACP Journal Club Renewal $348.00

Basic & Clinical Pharmacology Renewal $498.00

Current Diagnosis & Treatment Emergency Medicine - 6th Ed. (2008) Renewal $458.00

Current Diagnosis & Treatment in Infectious Diseases Renewal $461.00

Current Medical Diagnosis & Treatment Renewal $1,236.00

Current Diagnosis & Treatment in Cardiology Renewal $461.00

Current Diagnosis & Treatment in Gastroenterology, Hepatology, and Endoscopy Renewal $417.00

Library Journal Collection in the Health Sciences/Nursing: The library currently has access to 281 electronic journals in nursing, 39 titles on evidence based medicine, 240 titles on clinical medicine and several hundred in general medicine. A link to the titles follows. http://xw6rp7da9l.search.serialssolutions.com/?V=1.0&L=XW6RP7DA9L&S=SC&C=HE

A few of the journal titles available will be useful for the DNP program are Evidence Based Nursing, Nursing Research, American Journal of Nursing, Patient care for the nurse practitioner, Journal of nursing education, Clinical excellence for nurse practitioners, Journal of Advanced Nursing, International Journal of Nursing Practice, ACP Journal Club, and Prescribers Letter.

If specific journal titles are needed that are not available, they will cost anywhere from $300-$6,000 a title per year depending on the title. One of the most expensive journals, Drugs, is $6,000 paid for by the College of Pharmacy. It is recommended that the DNP program purchases anywhere from 5-10 titles for the program once it is started.

Library databases for the health sciences:

Relevant databases the library currently subscribes to are:

- Alt HealthWatch
- CINAHL Full Text
- Health Source: Nursing/Academic Edition
- Lexi-Comp ONLINE
- MEDLINE
- Medical Letter on Drugs and Therapeutics
- Natural Medicines Comprehensive Database,
- Pharmacist's Letter
- Prescriber's Letter
- PubMed
- STAT!Ref Medical Text Books

The library subscribes to two Drug Information Databases paid for by the College of Pharmacy. The DNP program will have access to one, Lexi-Comp Online. If the program needs any other specialized databases it could cost from one to several thousand dollars per year per database.

Ovid Technologies has additional databases recommended for this program. One the program should consider is Ovid's Evidence Based Medicine Reviews Multifile which costs about $2,500 per year. This would not be essential for a start up collection but of great use once the program is in full.

Audio-visual materials used for learning are costly. If the program plans on expanding the audio-visual collection funding will be needed.

- Program specific software is not a library issue. SPSS, n-Vivo, EndNotes, and NP-Tracker will have to be installed in the Nursing Lab.

The program does not need any further resources to begin but it is recommend that after the first few years that the DNP program spend about **$10,000** per year for the program. The library is requesting **$2000** of this for the OCLC Collection Analysis. WorldCat Collection Analysis is a Web-based service that provides analysis and comparison of library collections based on holdings information contained in the WorldCat database. This is so the library can compare and evaluate our collection against all the holdings in WorldCat. More information can be found here http://www.oclc.org/collectionanalysis/.

See Appendix E for additional library information.

	A	B	C	D	E	F	G	H	I
1	Academic Cost and RevenueTemplate - New Program (adjust template for appropriate number of years)								
2									
3	ENTER VALUES IN YELLOW CELLS ONLY								
4	CAMPUS/Program			Doctorate of Nursing Practice					
5				Provisional Years (2 yrs for Certificate, 3 yrs for Associate Degree, 6 yrs for Bachelor's Degree,					
6				Year 1	Year 2	Year 3	Year 4	Year 5	Year 6
7	ENTER ACADEMIC YEAR (i.e., 2004-05)			2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
8	Students & SSH								
9		A. Headcount enrollment (Fall)		10	20	30	30	30	30
10		B. Annual SSH		240	480	720	720	720	720
11									
12	Direct and Incremental Program Costs Without Fringe								
13		C. Instructional Cost without Fringe		$ 95,018	$ 216,104	$ 320,789	$ 330,406	$ 343,622	$ 357,367
14		C1. Number (FTE) of FT Faculty/Lecturers		1.00	2.00	3.00	3.00	3.00	3.00
15		C2. Number (FTE) of PT Lecturers		0.29	1.17	1.46	1.46	1.46	1.46
16		D. Other Personnel Costs		$ 40,000	$ 41,600	$ 43,264	$ 44,995	$ 46,794	$ 48,666
17		E. Unique Program Costs		$ 21,500	$ 31,900	$ 42,316	$ 48,349	$ 54,423	$ 56,599
18		F. Total Direct and Incremental Costs		$ 156,518	$ 289,604	$ 406,369	$ 423,749	$ 444,839	$ 462,633
19									
20	Revenue								
21		G. Tuition		$ 143,520	$ 295,680	$ 457,200	$ 470,880	$ 485,280	$ 500,400
22		Tuition rate per credit		$ 598	$ 616	$ 635	$ 654	$ 674	$ 695
23		H. Other		$ -	$ -	$ -	$ -	$ -	$ -
24		I. Total Revenue		$ 143,520	$ 295,680	$ 457,200	$ 470,880	$ 485,280	$ 500,400
25									
26	J. Net Cost (Revenue)			12,998	-6,076	-50,831	-47,131	-40,441	-37,767
27									
28									
29									
30	Program Cost per SSH With Fringe								
31		K. Instructional Cost with Fringe/SSH		$ 519	$ 578	$ 574	$ 591	$ 615	$ 640
32		K1. Total Salary FT Faculty/Lecturers		$ 82,600	$ 165,200	$ 255,234	$ 262,891	$ 273,407	$ 284,343
33		K2. Cost Including Fringe of K1		$ 111,510	$ 223,020	$ 344,566	$ 354,903	$ 369,099	$ 383,863
34		K3. Total Salary PT Lecturers		$ 12,418	$ 50,904	$ 65,555	$ 67,515	$ 70,216	$ 73,024
35		K4. Cost Including fringe of K3		$ 13,039	$ 53,449	$ 68,833	$ 70,891	$ 73,726	$ 76,675
36		L. Support Cost/SSH		$ 440	$ 458	$ 476	$ 495	$ 515	$ 535
37		Non-Instructional Exp/SSH		$ 391	$ 407	$ 423	$ 440	$ 457	$ 476
38		System-wide Support/SSH		$ 49	$ 51	$ 53	$ 55	$ 57	$ 60
39		Organized Research/SSH							
40		M. Total Program Cost/SSH		$ 959	$ 1,034	$ 1,050	$ 1,086	$ 1,130	$ 1,175
41		N. Total Campus Expenditure/SSH		$ 745	$ 775	$ 806	$ 838	$ 872	$ 906
42									
43	Instruction Cost with Fringe per SSH								
44		K. Instructional Cost/SSH		$ 519	$ 576	$ 574	$ 591	$ 615	$ 640
45		O. Comparable Cost/SSH		$ 682	$ 709	$ 738	$ 767	$ 798	$ 830
46			Program used for comparison.	UHM- School of Nursing-GL (Nov. 2010 Report)					
47									
48		Reviewed by campus VC for Administrative Affairs:		for DF	(date)	4-28-2011			

Notes for Academic Cost and Revenue Template

	2012-2013	2013-2014	2014-2015	2015-2016	2016-2017	2017-2018
A. Headcount enrollment (Fall)						
Resident	10	20	30	30	30	30
Non-Resident	-	-	-	-	-	-
Total	10	20	30	30	30	30
B. Annual SSH						
Headcount	10	20	30	30	30	30
SSH per full-time student per Academic Year (8 credits x 3 semesters)	24	24	24	24	24	24
Total	240	480	720	720	720	720
D. Other Personnel Costs						
APT (Academic Support)	$ 40,000	$ 41,600	$ 43,264	$ 44,995	$ 46,794	$ 48,666
Total	$ 40,000	$ 41,600	$ 43,264	$ 44,995	$ 46,794	$ 48,666
CB increase		0%	0%	0%	0%	0%
Inflation increase		4%	4%	4%	4%	4%
E. Unique Program Costs						
Library	$ 10,000	$ 10,400	$ 10,816	$ 11,249	$ 11,699	$ 12,167
Equipment / Supplies	$ 5,000	$ 10,000	$ 15,000	$ 15,600	$ 16,224	$ 16,873
Others	$ 6,500	$ 11,500	$ 16,500	$ 21,500	$ 26,500	$ 27,560
Total	$ 21,500	$ 31,900	$ 42,316	$ 48,349	$ 54,423	$ 56,599
G. Tuition Rate Per Credit						
Graduate students full time credit load is 8 credits per semester (Fall, Spring & Summer = 24). Because currently there is						
Resident Tuition	$ 14,352	$ 14,784	$ 15,240	$ 15,696	$ 16,176	$ 16,680
Credits per student	24	24	24	24	24	24
Tuition rate per credit	$ 598	$ 616	$ 635	$ 654	$ 674	$ 695
H. Revenue - Other						
Grants						
Aniticpated grants						
Total	$ -	$ -	$ -	$ -	$ -	$ -
K1. Total Salary FT Faculty/Lecturers						
New Faculty 1	$ 82,600	$ 82,600	$ 85,078	$ 87,630	$ 91,136	$ 94,781
New Faculty 2	$ -	$ 82,600	$ 85,078	$ 87,630	$ 91,136	$ 94,781
New Faculty 3	$ -	$ -	$ 85,078	$ 87,630	$ 91,136	$ 94,781
Total	$ 82,600	$ 165,200	$ 255,234	$ 262,891	$ 273,407	$ 284,343
CB increase		0%	3%	3%	0%	0%
Inflation increase		0%	0%	0%	4%	4%
K3. Total Salary PT Lecturers						
Number of credits taught	7	28	35	35	35	35
Step C rate	$ 1,774	$ 1,818	$ 1,873	$ 1,929	$ 2,006	$ 2,086
Total	$ 12,418	$ 50,904	$ 65,555	$ 67,515	$ 70,216	$ 73,024
CB increase		2%	3%	3%	0%	0%
Inflation increase		0%	0%	0%	4%	4%

Narrative for Program Cost/Revenue Projection

A. **Headcount Enrollment (Fall)** - The projected initial cohort accepted (AY 2012-2013) into the DNP program will consist of 10 students.

B. **Annual SSH** – As with enrollment (above), Annual Student Semester Hours are projected to be an average of 24 hours per enrolled student. (8 credits x 3 semesters. The program will operate in the summer session). In the first AY 2012-2013 the total SSH will total 240 hours (10 students x 24 Semester hours per student). There will be a consistent increase in the Annual SSH each academic year as new cohorts enter the program.

C. **Instructional Costs (without fringe)** – The creation of the DNP program will require the addition of both full time faculty and part time adjunct faculty. This is reflected on lines C1 & C2 of the Academic Costs and Revenue Template. **(C1)** – The DNP program will require one additional FTE faculty member to be added for each of the first 3 years of implementation of the program. **(C2)** – In addition to the creation of these full time positions outlined in C1, the DNP program will also employ adjunct faculty (which is reflected in the FTEs identified on line C2 of the template). The adjunct faculty needs for the program are as follows: AY1 – 0.29 FTEs, AY2-1.17 FTEs, AY3 thru AY6-1.46 FTEs. The adjunct faculty employed in the DNP program will teach executive model courses. These executive model courses will consist of didactic courses offered in intensive formats with on-line augmentation.

Employing affiliate faculty will reduce the cost of faculty salaries because affiliate faculty will be hired on a lecturer basis. The use of affiliate faculty will not only decrease costs of faculty salaries, but also increase flexibility of the executive model. Additionally, the program will have the ability to recruit a variety of nursing educators who are active experts in their fields, thus increasing the quality of the program. Our expert consultants, Drs. Novak and Pacquiau, are national nursing leaders in DNP education and have agreed to teach in the program in an intensive and on line format. Paying an honorarium, travel and short-term housing costs is significantly less than full time salaries with fringe benefits. These affiliate faculty members will also further enrich the development of UHH SON faculty.

D. **Other Personnel Costs** – Other personnel costs include the creation of a program advisor/administrative support personnel position. Salary without fringe is planned to be $40,000 annually with an estimated 4 percent annual increase. Additional information regarding the responsibilities of this position is discussed under the resources portion of this proposal.

E. **Unique Program Costs** – AY 2012-2013 unique program costs total $21,500. (1) This total includes $10,000 annually for library expenses. Creation of the DNP program will require the purchase of some additional library journals and textbooks. Program specific

software purchases are planned to include SPSS, n-Vivo, EndNote, and NP-Tracker. The cost of DNP library materials will be funded with planning grant funds. Numbers included in this budget are a reflection of the required annual professional fees for new cohorts as they enter the program and for an ongoing update of library materials. It is recommended that the DNP program spend $10,000 per year for the program. The library is requesting $2,000 of this for the OCLC Collection analysis. (2) Program operating expenses including equipment and supplies costs total $5,000. This figure is also projected to cover expenses related to advanced physical assessment equipment. (3) Lastly these costs include an estimated $6,500 to fund travel expenses, faculty development, and adjunct faculty expenses. This total is estimated to increase annually based on increasing equipment and travel expenses. The six year projection of this increase includes: AY 2 to $31,900; AY 3 to $42,316; AY 4 to $48,349; AY 5 to $54,423; and AY 6 to $56,599.

G. **Tuition** – Tuition rate per credit for the DNP is planned to be $598 (AY 2012-2013). This tuition rate has been established based on an analysis of the tuition rates schedule that was released for the 2009-2012 academic years.

Regular Semester | Summer Session

PCH = Per Credit Hour, FT = Full Time, NA = Not Applicable

	2009-10				2010-11				2011-12			
	Resident		Non-Res		Resident		Non-Res		Resident		Non-Res	
	PCH	FT	PCH	FT	PCH	FT	PCH	FT	PCH	FT	PCH	FT
UH Manoa[1]												
Undergraduate	282	3384	784	9408	316	3792	876	10512	350	4200	968	11616
Graduate	372	4464	898	10776	415	4980	1007	12084	458	5496	1116	13392
Graduate - Nursing	589	7068	1112	13344	657	7884	1247	14964	725	8700	1382	16584
Graduate - CBA Masters[2]	622	7464	964	11568	665	7980	1073	12876	708	8496	1182	14184
Law - JD	633	7596	1174	14088	665	7980	1251	15012	697	8364	1328	15936
Law - LLM	1236	14832	1236	14832	1317	15804	1317	15804	1398	16776	1398	16776
Medicine	1034	12408	2121	25452	1125	13500	2341	28092	1216	14592	2561	30732
UH Hilo[1]												
Undergraduate	191	2292	587	7044	213	2556	650	7800	235	2820	713	8556
Graduate	292	3504	672	8064	320	3840	736	8832	348	4176	800	9600
Pharmacy[3]	NA	8269	NA	16538	NA	8682	NA	17365	NA	8682	NA	17365

Because there is not currently a graduate nursing program at UH Hilo, there is currently no graduate nursing tuition rate. After reviewing the above tuition schedule it is apparent that on average UH Hilo tuition is 80% of that charged at UH Mānoa. Additionally, during the AY 2009 thru 2012 there was a 9% tuition rate increase annually. Based on these figures the tuition developed for the UH Hilo Graduate nursing program is proposed to be at 80% of the $725 charged for residents in AY 2011-2012. This results in a rate per credit hour of $580. Because the UH Hilo DNP program will not start until the AY 2012-2013, the rate of 580 has been increased by 3% to $598 The subsequent years on the DNP budget also reflect a conservative 3% annual increase. A memo has been submitted to the Board of Regents in order to address this issue of the need to create a UH Hilo Graduate Nursing Tuition Rate if this proposal is approved.

H. Other Revenue –NA

J. Net Cost (Revenue) – See table

O. Comparable Costs/SSH – UHH SON's projected instructional costs remain lower than cost comparisons taken from the UHM School of Nursing's instructional costs. UHM School of Nursing was used as a comparison due to the fact that they currently had the only graduate of nursing tuition rate within the UH system available for comparison. Figures were taken from the Expenditure Studies University of Hawaii Fiscal Year 2009-10 report retrieved from:

https://www.hawaii.edu/budget/pdfs/Actual%20Expenditures%20by%20Campus%202009-10%20(2).pdf

Program Efficiency

How efficient will the program be?

Academic efficiency is of utmost importance in the UHH SON plan to develop a DNP program at the University of Hawai`i Hilo. Key components that influence academic efficiency include: enrollment, student retention rates, and graduation rates.

Enrollment

University data indicate the University of Hawai`i Hilo has had a 42% increase in enrollment over the past 10 years (UHH Website, 2010). This growing academic demand has made an impact on the School of Nursing. In 2007, to meet the demand for admission to the baccalaureate nursing program, the School of Nursing increased the number of student admissions by 50%. Current enrollment is now 30 students each year.

According to the Hawai'i State Center for Nursing's - Nursing Education Program Report for the 2007-2008 academic year, 479 qualified nursing program applicants (programs in this total included varying nursing programs from ADN to PhD) were denied entry into public nursing programs due to lack of space. The PhD in nursing program at UH Mānoa turned away 24 qualified applicants. The need for increased academic opportunities for students is evident and this demand will help secure qualified applicants to the proposed DNP program at UHH as well as provide consistent enrollment at the rate of 10 students per cohort.

Retention/Graduation Rates

UHH SON maintains a high retention/graduation rate for students enrolled in the undergraduate nursing program. The last three graduating classes (2007-2009) had an average graduation rate of 94%. With the addition of the DNP program, the high graduation rate for the UHH School of Nursing is projected be maintained because: 1) students entering a DNP program have already demonstrated ability to successfully complete a degree program and understand the rigors of academics and 2) students anticipated to enter the program are students who live locally and wish to stay in their home environment (based on surveyed interest). Such a trend would suggest little or no attrition from the program due to location concerns.

Compare anticipated students per faculty, average size class, and other similar measures with other programs at Mānoa.

A new DNP program built on an existing BSN program allows for increased program efficiency. New facilities are not requested for the DNP because existing classrooms and faculty offices in the UCB are adequate. Utilization of an executive model with didactic courses offered in intensive formats with on-line augmentation allows for use of the existing BSN facilities during periods of lower demand (summers and weekends). Since the community is the laboratory for the DNP program, student clinical experiences will occur in clinics, hospitals, and rural community settings such as churches and schools.

In addition to utilizing current BSN faculty and employing adjunct faculty, the creation of the DNP program will require one additional full-time faculty member to be added for each of the first 3 years of implementation of the program. The DNP program will also utilize Mānoa faculty per the MOU agreement and the College of Pharmacy faculty.

Students per faculty/Class size- In order to ensure maximum efficiency and quality in education, the following standards have been established for the proposed DNP program. A maximum 10:1 (student to faculty) ratio will be maintained for clinical experiences. Student to faculty ratio will be increased for theory courses. Course sequencing has been planned to simultaneously accommodate students from different cohorts thereby streamlining faculty demand to teach courses multiple times in one academic year. Cohort size is similar to the cohort size of the PhD in nursing program at the Mānoa campus.

Appendix A
Letters of Support & Commitments to Teach

Hawai'i Community College
Nursing & Allied Health

UNIVERSITY of HAWAI'I
HAWAI'I
COMMUNITY COLLEGE

October 11, 2010

Katharyn Daub, EdD, CTN, CNE
Professor and Director
University of Hawai'i Hilo
School of Nursing
200 W. Kawili Street
Hilo, Hawai'i 96720

Dear Dr. Daub:

I am writing to offer my full support to the University of Hawai'i Hilo, School of Nursing (UHHSON) for a Doctor of Nurse Practice (DNP) program. We have worked closely with UH Hilo within the RN to BSN option and are excited about the DNP program possibilities for our student academic and professional careers in nursing.

There is a concern about the need for access and availability of care throughout Hawai'i Island. The faculty of Hawai'i Community College is pleased to learn of UHHSON's interest in developing a DNP program that will provide additional primary care providers for the island.

The UHHSON has supported an RN to BSN option, and this DNP program will further the educational pipeline on the Island of Hawai'i. I look forward to working with you and the UHHSON to advance nursing education and practice on Hawai'i Island.

Sincerely,

Elizabeth Ojala R.N., Ph.D.
Director of Nursing Programs
Chair, Nursing & Allied Health

/li

200 W. Kāwili St.
Hilo, Hawai'i 96720-4091
Telephone: (808) 974-7560
Fax: (808) 974-7778

UNIVERSITY
OF HAWAII
HILO

October 11, 2010

Katharyn Daub, EdD, CTN, CNE
Professor and Director
University of Hawaii at Hilo
School of Nursing
200 W. Kawili Street
Hilo, Hawaii 96720

Dear Kay,

I am pleased to write this letter of support to the University of Hawaii at Hilo School of Nursing (UHHSON) for a Doctor of Nurse Practice (DNP) program.

Access and availability of care throughout the Big Island of Hawaii and the nation is of great concern. We are pleased to learn of the plans for UHHSON to develop a DNP program that will enable graduates to provide primary and preventive health care to those in need. This is especially critical due to our rural Island health care needs and we strongly support development of the program.

The UHHSON has proven its ability to meet the need for providing nurses at Baccalaureate level. It is now the time to offer the highest professional degree in nursing. The DNP program will undoubtedly provide numerous benefits for our community.

In addition, the School of Nursing and the College of Pharmacy envision collaboration as an interdisciplinary team equipped to educate future health care professionals. We envision the development of a dual degree (DNP/PharmD) in the future. This health care provider will be able to meet the increasingly complex care needs of our communities, especially our elderly population.

Sincerely yours,

John M. Pezzuto
Professor and Dean

COLLEGE OF PHARMACY / Office of the Dean
34 Rainbow Drive, Hilo, Hawai'i 96720-4091 • Phone (808) 933-2909 • Fax (808) 933-2981 • pharmacy@hawaii.edu • http://pharmacy.uhh.hawaii.edu

Family Health Centers

October 11, 2010

Katharyn Daub, EdD, CTN, CNE
Professor and Director
University of Hawaii at Hilo
School of Nursing
200 W. Kawili Street
Hilo, Hawaii 96720

Dear Dr. Daub,

It is with great excitement and enthusiasm that I write this letter of support for the University of Hawaii at Hilo School of Nursing (UHHSON) for a Doctor of Nurse Practice (DNP) program.

The Bay Clinic has been affiliated with the UH Hilo School of Nursing for many years and have employed numerous nursing graduates. We support the proposal for a DNP program and see how this health care professional could have a tremendously critical role in the health care provider shortage. The concerns about the lack of access and availability of care throughout the Big Island of Hawaii are paramount. We are pleased to learn of UHHSON's interest in developing a DNP program that will enable the graduates to provide primary and preventive health care to those in need.

I strongly support UHHSON's plans to establish an advance-nursing program. The UHHSON has proven its ability to meet the need for providing nurses at Baccalaureate level. It is now the time to offer the highest professional degree in nursing. The DNP program will undoubtedly provide numerous benefits to our community. In addition, several staff members at Bay Clinic have expressed interest in the program and are looking forward to the opportunity to enter the program.

Sincerely,

Paul Strauss, C.E.O. Bay Clinic Inc.

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224 Haili St. Bld B.
Hilo, HI 96720
808-961-4071

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Hilo Family Health Center
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Hilo, HI 96720
808-969-1427

Ka'ū Family Health Center
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Na'alehu, HI 96772
808-929-7311

Kea'au Family Health Center
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Kea'au, HI 96749
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Bld. C. Ste. A.
Pāhoa, HI 96778
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Find us on the web at: www.bayclinic.org Email: bcicomments@bayclinic.org

DANIEL K. INOUYE
HAWAII

COMMITTEE ON APPROPRIATIONS, CHAIRMAN
SUBCOMMITTEE ON DEFENSE, CHAIRMAN
COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION
COMMITTEE ON INDIAN AFFAIRS
DEMOCRATIC STEERING AND COORDINATION COMMITTEE
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FAX (808) 541-2549

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(808) 935-0844
FAX (808) 981-5183

September 7, 2010

Katharyn F. Daub, R.N.
Chair and Professor
Baccalaureate Nursing Department
University of Hawaii at Hilo
200 West Kawili Street
Hilo, Hawaii 96720

Dear Professor Daub:

On behalf of Senator Inouye, who is away from the office, I am writing to express our sincerest congratulations on your recent receipt of the congressionally directed initiative for Fiscal Year 2010. At the appropriate time, we would appreciate receiving a report from you regarding how you are utilizing these funds, and further, your long term vision for serving the residents of the Neighbor Islands and the Pacific Basin Region. We hope that this will allow you to continue your efforts with the College of Pharmacy for an integrated Nursing/Pharmacy training program targeting our nation's elderly.

Aloha and Mahalo,

PATRICK H. DeLEON
Chief of Staff

PHD:gjw
Enclosure

cc: Chancellor Donald Straney
w/Enclosure
Jennifer Sabas
w/Enclosure
Delbert Nishimoto
w/Enclosure

July 10, 2010

Dear Professor Lovell,

As the director of a group of small rural non-profit clinics I am delighted to add my letter of support for the University of Hawaii at Hilo's new grant application to set up a Doctor of Nurse Practitioner (DNP) Program in your Department of Nursing. We will of course be delighted to serve as an intern site for these practitioners.

The reasons are very simple from our perspective. First we need to be able to provide the best and latest care to our various clients at a cost that is not prohibitive to the client nor to us. The DNP Program will do just that. And this is not because the practitioner is a second rate medical provider but because we can move away from the medically dominated model of reimbursement.

Secondly all through my career I have noticed that our clients, in a variety of settings urban as well as rural, all seem to have a natural preference for nursing practitioners – which has accounted I believe for the increasing numbers of NPs in health clinics. When we add the doctorate to the regular NP curriculum it seems that you are added additional quality at very little extra cost and are providing an added measure of patient satisfaction.

Finally and perhaps most important of all I am delighted that it is your Dept of Nursing that is making the grant application. As you know, keeping rural clinics staffed with quality health professionals is a difficult task. My hope is that you will be naturally attracting candidates to your program who want to serve in rural areas rather than seeing it as a way to pay off educational debts.

Knowing the quality of your program I have no doubt but that your application will be very successful.

Aloha,
John Casken, RN., MPH., PhD
Associate Professor/Specialist
School of Nursing and Dental Hygiene
University of Hawaii at Manoa
(808) 956-5750

DANIEL K. INOUYE
HAWAII

COMMITTEE ON APPROPRIATIONS, CHAIRMAN
SUBCOMMITTEE ON DEFENSE, CHAIRMAN
COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION
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September 24, 2010

Sidney A. McNairy, Jr., Ph.D., D.Sc.
Associate Director for Research Infrastructure
Director, Division of Research Infrastructure
National Center for Research Resources
National Institutes of Health
6701 Democracy Boulevard, Room 934-MSC 4874
Bethesda, Maryland 20892

Dear Dr. McNairy:

I wanted to express my personal appreciation for your willingness to address the truly pressing needs of the University of Hawaii at Hilo in establishing and developing a robust biomedical sciences research community. The funding of approximately $1 million a year, which they will now be receiving, will truly make a difference.

As the Delegation expressed to then National Institutes of Health Director, Dr. Elias Zerhouni, in a letter dated February 7, 2008, "during our tenures in the Congress, we have always made it a special point of encouraging the University of Hawaii to expand educational opportunities to the residents of the Neighbor Islands."

Again, please accept our sincerest appreciation. We are confident that Dean John Pezzuto, Professor Katharyn Daub, and the newly appointed Chancellor, Dr. Donald Straney, will ensure that these federal funds are well utilized.

Aloha and Mahalo,

DANIEL K. INOUYE
United States Senator

DKI:phdw
Enclosure
cc: Dean John Pezzuto
w/Enclosure
Professor Katharyn Daub
w/Enclosure
Chancellor Donald Straney
w/Enclosure
President M.R.C. Greenwood
w/Enclosure

DANIEL K. INOUYE
HAWAII

APPROPRIATIONS
Subcommittee on Defense—Chairman

COMMERCE, SCIENCE AND TRANSPORTATION
CHAIRMAN

COMMITTEE ON INDIAN AFFAIRS

DEMOCRATIC STEERING AND COORDINATION
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FAX (808) 961-5103

February 7, 2008

Elias Zerhouni, M.D.
Director
National Institutes of Health
900 Rockville Pike
Bethesda, Maryland 20892-0001

Dear Dr. Zerhouni:

During our tenures in the Congress, we have always made it a special point of encouraging the University of Hawaii to expand educational opportunities to the residents of the Neighbor Islands. Given the island nature of the State of Hawaii, it is often times difficult for residents on these islands to obtain advanced degrees from the University of Hawaii at Manoa due to cost and economic restraints, family obligations, and, in candor, the genuine desire many of our constituents to remain in the area where they were born.

Accordingly, we have been very pleased, in the recent past, of the development of the University of Hawaii at Hilo and the University's investment in Distance Learning in order to provide quality courses throughout the State. For example, this past year, the University of Hawaii at Hilo enrolled its first class in the College of Pharmacy which will ultimately be granting a PharmD degree. Similarly, the Native Hawaiian Studies Program has now also enrolled doctorate level students.

Earlier this year, the University of Hawaii Nursing Program received recommendation for a full eight year reaccreditation from the National League for Nursing Accrediting Commission. Four of the faculty have Doctorates, nine are masters prepared, two of which are in their fourth year of a Ph.D. in Nursing, and two additional faculty have just begun Ph.D. studies this semester. The vision of Dr. Kay Daub and her colleagues is to have a transcultural focus and have the unique feature of a transcultural thread through out each course. The program is integrating simulation into lab courses.

We are especially pleased that they are working closely with both the Manoa Nursing Program and also the Hilo Medical Center which recently received funding

Elias Zerhouni, M.D.
February 7, 2008
Page 2

from the Department of Defense for its high fidelity simulation training.

Accordingly, at this time, we would appreciate your assistance in urging your colleagues at the National Institutes of Health to explore any opportunities that might be available in order to continue to expand the expertise of the nursing faculty and student body, including, for example, the possibility of establishing a developmental Center of Excellence. We look forward to hearing from you.

Aloha,

DANIEL K. INOUYE
United States Senator

DANIEL K. AKAKA
United States Senator

MAZIE HIRONO
Member of Congress

NEIL ABERCROMBIE
Member of Congress

LINDA LINGLE
GOVERNOR

CHIYOME LEINAALA FUKINO, M.D.
DIRECTOR OF HEALTH

STATE OF HAWAII
DEPARTMENT OF HEALTH
KAUAI DISTRICT HEALTH OFFICE
3040 UMI STREET
LIHUE, HAWAII 96766

Dileep G. Bal, MD, M.S., M.P.H.
KAUAI DISTRICT HEALTH OFFICER

August 5, 2010

Katharyn Daub, EdD, CTN, CNE
Professor and Director
University of Hawaii at Hilo
School of Nursing
200 W. Kawili Street
Hilo, Hawaii 96720

Dear Ms Daub:

It is a pleasure to write this letter of recommendation in support of the University of Hawaii at Hilo School of Nursing's (UHHSON) planned Doctorate in Nursing Practice (DNP) program. I believe it will be an important contribution to the current and future nursing needs for State of Hawaii.

The DNP will provide education in advanced nursing practice and support both clinical nursing as well as educational programs. Such educational programs are essential because both clinical/hospital nursing staff and nursing faculties are expected to retire at increasing rates in coming years. At this time, there are no other DNP programs in the State of Hawaii. The UHHSON would provide the only such educational opportunity in our state. In addition, with the demands of our nation's healthcare and the changes to come are inevitable, it is paramount that Hawaii expands nursing knowledge and nursing practice to meet the needs not only in the clinical arena but also address future nursing shortages.

I strongly support UHHSON's plans to establish an advance-nursing program. The UHHSON has proven its ability to meet the need for providing nurses at Baccalaureate level represented from all of our islands.

Sincerely,

Cashmire Lopez

Cashmire Lopez, MS, APRN
Program Manager
Kauai District Health Office
Family Health Services Section

bayclinic

Family Health Centers

August 17, 2010

Katharyn Daub, EdD, CTN, CNE
Professor and Director
University of Hawaii at Hilo
School of Nursing
200 W. Kawili Street
Hilo, Hawaii 96720

Dear Kay,

It is my pleasure to write this letter of recommendation in support of the University of Hawaii at Hilo School of Nursing's (UHHSON) planned Doctorate in Nursing Practice (DNP). I believe it will be an important contribution to the current and future nursing needs for the Big Island as well the State of Hawaii.

The DNP will provide education in advanced nursing practice and support both clinical nursing as well as educational programs. Such educational programs are essential because both clinical/hospital nursing staff and nursing facilities are expected to retire at increasing rates in coming years. At this time, there are no other DNP programs in the State of Hawaii. The UHHSON would provide the only such educational opportunity in our State.

The addition of the DNP will be an asset for UHHSON as well provides numerous benefits to our community.

Sincerely,

Charlotte Grimm, APRN, Clinical Operations Director

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F) 808-965-9895

Find us on the web at: www.bayclinic.org Email: bcicomments@bayclinic.org
Bay Clinic, Inc. is a 501(c)3 nonprofit community health center

UNIVERSITY OF HAWAI'I HILO

April 8, 2011

Rubab Qureshi
236 Grandview Avenue
North Caldwell, NJ 07006

Dear Rubab,

The University of Hawaii at Hilo is in the planning phase of a Doctorate of Nursing Practice (DNP). We are so pleased that you are interested in teaching with us. It is our hope that the program will launch in August of 2011, after we receive the Board of Regent's approval and the WASC approval.

This memo is intended to serve as an acknowledgement of your commitment to teach in our program as a lecturer. I have reviewed your CV and feel that you are very qualified to teach in a graduate program of this capacity, and I look forward to working with you in the future.

The lecturer pay at UH Hilo is $1,685 per credit hour. Most of the courses will be on-line using an executive model. If you do teach an executive model course that is on site, the School of Nursing will pay for travel and accommodations for the 5-6 day intensives.

I look forward to hearing from you soon, and I would appreciate a signed acknowledgement for our files.

Sincerely,

Dr. Kay Daub
Director and Professor
University of Hawaii at Hilo
School of Nursing

I would like to teach for the SON at UH Hilo DNP program

Signed _____ Date 4/13/11

NATURAL SCIENCES Baccalaureate Nursing
200 W. Kawili St. Hilo, HI 96720-4091 • Phone: (808) 974-7760 • Fax: (808) 974-7665 • www.uhh.hawaii.edu/nursing

UNIVERSITY OF HAWAII HILO

April 8, 2011

Dear Dr. Noel Chrisman,

The University of Hawaii at Hilo is in the planning phase of a Doctorate of Nursing Practice (DNP). We are so pleased that you are interested in teaching with us. It is our hope that the program will launch in August of 2011, after we receive the Board of Regent's approval and the WASC approval.

This memo is intended to serve as an acknowledgement of your commitment to teach in our program as a lecturer. I have reviewed your CV and feel that you are very qualified to teach in a graduate program of this capacity, and I look forward to working with you in the future.

The lecturer pay at UH Hilo is $1,685 per credit hour. Most of the courses will be on-line using an executive model. If you do teach an executive model course that is on site, the School of Nursing will pay for travel and accommodations for the 5-6 day intensives.

I look forward to hearing from you soon, and I would appreciate a signed acknowledgement for our files.

Sincerely,

Dr. Kay Daub
Director and Professor
University of Hawaii at Hilo
School of Nursing

I would like to teach for the SON at UH Hilo DNP program

Signed _____ Date 4/4/11

NATURAL SCIENCES *Baccalaureate Nursing*
200 W. Kāwili St. Hilo, HI 96720-4091 • Phone: (808) 974-7760 • Fax: (808) 974-7665 • www.uhh.hawaii.edu/nursing

UNIVERSITY OF HAWAII
HILO

April 8 2011

Rachel Spector
24 Lexington Avenue
Newtown, MA 02164

Dear Rachel

The University of Hawaii at Hilo is in the planning phase of a Doctorate of Nursing Practice (DNP). We are so pleased that you are interested in teaching with us. It is our hope that the program will launch in August of 2011, after we receive the Board of Regent's approval and the WASC approval.

The memo is intended to serve as an acknowledgement of your commitment to teach in our program as a lecturer. I have reviewed your CV and feel that you are very qualified to teach in a graduate program of this capacity, and I look forward to working with you in the future.

The lecturer pay at UH Hilo is $1,685 per credit hour. Most of the courses will be on line using an executive model. If you do teach an executive model course that is on site, the School of Nursing will pay for travel and accommodations for the 5-6 day intensive.

I look forward to hearing from you soon, and I would appreciate a signed AOA acknowledgement for our files.

Sincerely,

Dr. Kay Cave
Director and Professor
University of Hawaii at Hilo
School of Nursing

I would like to teach for the SON at UH Hilo DNP program

Signed Rachel E. Spector Date April 11, 2011

200 W. Kawili St. Hilo, HI 96720-4091 • Phone [illegible] • Fax [illegible] • www.uhh.hawaii.edu/nursing
An Equal Opportunity/Affirmative Action Employer

UNIVERSITY OF HAWAI'I HILO

April 8, 2011

Dear Dr. Dula Pacquiao,

The University of Hawaii at Hilo is in the planning phase of a Doctorate of Nursing Practice (DNP). We are so pleased that you are interested in teaching with us. It is our hope that the program will launch in August of 2011, after we receive the Board of Regent's approval and the WASC approval.

This memo is intended to serve as an acknowledgement of your commitment to teach in our program as a lecturer. I have reviewed your CV and feel that you are very qualified to teach in a graduate program of this capacity, and I look forward to working with you in the future.

The lecturer pay at UH Hilo is $1,685 per credit hour. Most of the courses will be on-line using an executive model. If you do teach an executive model course that is on site, the School of Nursing will pay for travel and accommodations for the 5-6 day intensives.

I look forward to hearing from you soon, and I would appreciate a signed acknowledgement for our files.

Sincerely,

Dr. Kay Daub
Director and Professor
University of Hawaii at Hilo
School of Nursing

I would like to teach for the SON at UH Hilo DNP program

Signed Dula V Pacquiao Date 4/11/11

NATURAL SCIENCES *Baccalaureate Nursing*

200 W. Kāwili St. Hilo, HI 96720-4091 • Phone: (808) 974-7760 • Fax: (808) 974-7665 • www.uhh.hawaii.edu/nursing

UNIVERSITY OF HAWAI'I HILO

April 8, 2011

Dear Dr. Zoon Naqvi,

The University of Hawaii at Hilo is in the planning phase of a Doctorate of Nursing Practice (DNP). We are so pleased that you are interested in teaching with us. It is our hope that the program will launch in August of 2011, after we receive the Board of Regent's approval and the WASC approval.

This memo is intended to serve as an acknowledgement of your commitment to teach in our program as a lecturer. I have reviewed your CV and feel that you are very qualified to teach in a graduate program of this capacity, and I look forward to working with you in the future.

The lecturer pay at UH Hilo is $1,685 per credit hour. Most of the courses will be on-line using an executive model. If you do teach an executive model course that is on site, the School of Nursing will pay for travel and accommodations for the 5-8 day intensives.

I look forward to hearing from you soon, and I would appreciate a signed acknowledgement for our files.

Sincerely,

Dr. Kay Daub
Director and Professor
University of Hawaii at Hilo
School of Nursing

I would like to teach for the SON at UH Hilo DNP program

Signed _____ Date 4/17/2011

NATURAL SCIENCES *Baccalaureate Nursing*
200 W. Kawili St. Hilo, HI 96720-4091 • Phone: (808) 974-7760 • Fax: (808) 974-7665 • www.uhh.hawaii.edu/nursing

Appendix B
Approved ATP

AUTHORIZATION TO PLAN AN ACADEMIC PROGRAM

1. School/College and Department/Unit: UH Hilo Nursing Department, College of Arts and Sciences

2. Chair of Planning Committee: Katharyn Daub, EdD, RN, CTN-A.

3. Program Category: _X_ New ___ Modified ___ Interdisciplinary
4a. Degree or Certificate Proposed: Doctorate of Nursing Practice (DNP)
4b. List similar degrees offered in UH System: Currently there is no Doctorate of Nursing Practice (DNP) program offered within the UH system or in the state of Hawaii. UH Manoa offers a PhD in Nursing.
5. Planning
a. Planning period: August 2009 thru September 2010
b. Activities to be undertaken during planning phase: During the one year planning period nine formal and numerous sub-committee meetings took place in order to discuss the feasibility of implementing this proposed program. These meetings focused on researching the need for such a program in the community, the existence of similar programs in the country, and trends in requirements for advance practice nurses especially those pertaining to prescriptive authority. Based upon research and planning activities already underway, a grant proposal has been written and approved to assist with funding for the creation and implementation for the proposed program. Some of these grant funds are being utilized to fund consultation that has already begun with Dr. Julie Novak, DNSc, RN, CPNP, FAANP, Professor and Associate Dean for Practice and Engagement, University of Texas Health Science Center San Antonio. Dr. Novak is Professor Emeritus and the former Head and DNP Program Director for Purdue University and former Primary Care NP Program Director for the University of Virginia (UVA). Dr. Dula Pacquiau EdD, RN, CTN is Professor and Director of the Stanley Bergen Center for Multicultural Education at, Research and Practice School of Nursing, University of Medicine and Dentistry of New Jersey and the Senior Editor for the Journal of Transcultural Nursing. Drs. Novak and Pacquiau have agreed to teach in the program as lecturers/adjunct faculty/visiting scholars during Maymester, Summer Institute and January Intersession Intensives. This model has been quite effective in nursing education in highly ranked nursing programs such as Vanderbilt University, Case Western Reserve Francis Payne Bolton School of Nursing, and the University of Texas.
c. Proposed Date of Implementation: As early as summer 2011 if all necessary approvals have been obtained. Ideally, UH Hilo would lead Hawaii in launching the first DNP program in the state. This timeline is realistic because the DNP curriculum is standardized nationally (AACN DNP Essentials), the UHH School of Nursing (SON) DNP Task Force and consultants have completed a culturally proficient adaptation, and the full proposal will be completed in September 2010.
d. Workload/budget implications during planning period: The planning is being conducted by existing faculty members and two external consultants. A grant has been received totaling $383,130 to fund consultation fees and travel expenses, overload, faculty development, administrative support, and equipment in order to meet the nursing program objectives in the development and initiation of this endeavor. Upon HRSA approval, roll over funds will be used to support teaching assistantships.

6a. Program Description: The University of Hawaii at Hilo Nursing Program, which currently offers a Baccalaureate of Science in Nursing (BSN), proposes to offer a Post Master's and Post Baccalaureate Doctor of Nursing Practice (DNP) program. The Post Master's DNP program allows existing APRNs to attain the highest practice degree, the DNP, as required by the American Association of Colleges of Nursing by 2015. The Post Master's DNP option builds on the strengths of individuals who are already licensed as advanced practice nurses by offering a doctoral program that enhances their knowledge of healthcare systems, health policy, and finance and creates a cadre of new nursing faculty who can immediately address the nursing faculty shortage.
The Post Baccalaureate DNP program is intended to allow entry into the DNP program for nurses who are not already APRNs. The program will train registered nurses to be Family Nurse Practitioners

(FNP) with a subspecialty in Transcultural Nursing. The DNP curriculum will build on a traditional FNP program by facilitating advanced scholarly inquiry as to best clinical evidence-based practices to meet the unique needs of the culturally diverse, rural and underserved communities, particularly on the Island of Hawaii. The DNP curricula also builds on traditional master's programs by providing education in evidence-based practice, systems design and leadership, health policy development, health economics, and quality improvements which address the demands of this nation's complex healthcare environment.

6b. Goals & Objectives of the DNP Program:

Goal 1: To create an advanced nursing practice Doctor of Nursing Practice DNP program with a focus on practice and research in cultural diversity, chronic care, health promotion, and disease prevention in rural communities.

Objective 1: Develop and begin to implement a DNP curriculum that provides doctoral level education which includes the scientific knowledge and clinical research of populations required for safe nursing practice and growing concerns regarding the quality of patient care delivery and outcomes.

Objective 2: Provide unique education and training for graduate students in (a) cultural competency and culturally competent research methods, (b) chronic care management and the unique needs of the growing population of older adults, (c) health technology and electronic health records for use in rural areas, (d) community based participatory research to facilitate formation of community partnerships and engage people in the community in addressing their needs, and (e) healthcare systems design, finance, and policy development.

Objective 3: Develop a program that educates and trains primary healthcare providers who are grounded in community and population-based health promotion.

Objective 4: Develop a program that helps address health disparities and improve community capacity.

6c. How the Program Supports the Mission of the University of Hawaii at Hilo:

The primary mission of UH Hilo is to offer high quality undergraduate liberal arts and professional programs. Selected graduate degree programs are also offered where the need is documented and the university has strong expertise. *The University of Hawai'i for the 21st Century* brochure outlines President Greenwood's initiatives to ensure a strong educational and economical future for Hawaii by "meeting Hawai'i's crucial workforce needs, generating jobs, and contributing to a brighter economic future." http://www.hawaii.edu/offices/op/2010/initiatives-brochure.pdf. The creation of a DNP program at UH Hilo addresses the mission of UH and the initiatives outlined in *The University of Hawai'i for the 21st Century* by: (1) improving local student's access to higher education– currently there is no DNP programs available to students in the state of Hawaii, participation is such a program would require students to move to the mainland to pursue studies, (2) increasing the "range of opportunities for our students" currently there is no program in Hawaii that will prepare APRNs to meet the increasing educational requirements set forth by the American Association of Colleges of Nursing by 2015 to attain the highest practice degree, the DNP, and (3) Contributing to Hawaii's overall economic future by creating an innovative program that meets both our communities educational and healthcare needs (background will be provided under Program Justification #7 surrounding Hawaii's primary care provider shortage).

http://www.uhh.hawaii.edu/uhh/strategic/vision_mission.php The creation of the DNP program with a focus on transcultural nursing supports the mission of UH Hilo in providing a learning environment that is responsive to the needs of a richly diverse student population and community and stresses a rigorous and high quality advanced professional education in a personalized atmosphere. This educational experience facilitates student-faculty interactions, and offers interdisciplinary experiential clinical, leadership, and research experiences. This program places an emphasis on

delivery of quality transcultural primary care within a rural environment. The program blends Western medicine, Eastern traditions and Native Hawaiian heritage.

6d. Strategic Plan:

- Develop a DNP course curriculum and course outlines by September 2010 (ongoing).
- Submit Notification to Hawaii State Board of Nursing for intent of Program Creation (Acknowledged by the Board of Nursing September 22, 2009).
- Seek program approval from the Western Association of Schools and Colleges (WASC) accrediting body.
- After program initiation, seek accreditation from the Commission for Collegiate Nursing Education (CCNE).
- Recruit and hire key personnel and consultants (Drs. Novak and Pacquiau have made three visits and have agreed to teach in the program as adjunct faculty)
- Develop catalog for the program (Upon approval).
- Actively recruit students for the program (Upon approval).
- Phase I: Creation of a curricular track for entry of masters-prepared advanced practice nurses and a post-BSN track to begin the DNP.
- Phase II: Creation of a dual degree track component that will allow students to obtain both a DNP and PharmD. This will be the first program of its kind in the state and nation.

7. Program Justification

Clarifying the Difference between an APRN (or FNP) and a DNP

Historically APRN programs have prepared students with a Masters degree. The FNP is an APRN with both a masters degree and a specialty certification who is qualified to provide primary care for patients across the age continuum. Students who wished to further their education had to pursue a Ph.D. degree, even though the Ph.D. is a research degree that lacks a practice focus. The DNP curricula expands the APRN master's degree and gives students the opportunity to seek a practice based doctorate that provides an education in evidence-based practice, systems leadership, and quality improvements which addresses the demands of this nation's complex healthcare environment.

Why the Change from Master's Prepared to DNP Prepared APRNs? As the Education Requirements to be an APRN are Changing, Our Programs Must Change to Meet these Requirements

Creation of a DNP program will meet the increasing educational requirements for APRNs that are set for 2015. Currently a master's degree prepared nurse can enter into an APRN position. In 2004, the American Association of Colleges of Nursing (AACN) endorsed a *Position Paper on the Practice Doctorate in Nursing* which calls for a change in the minimum education requirement for APRNs to be increased from a masters degree to a practice doctorate by the year 2015 (AACN, 2004). UH Hilo's creation of a DNP program will be the first program of its kind in the state of Hawaii to prepare students to meet these increased educational requirements.
http://www.aacn.nche.edu/Media/FactSheets/dnp.htm

Services DNPs are Prepared to Deliver

DNPs are healthcare practitioners who provide quality primary care for patients across the age continuum with a focus on diagnosing and treating common acute and chronic illnesses, prescribing medications, and administering physical exams. In addition, DNP roles focus on wellness, patient education, disease prevention, chronic disease management, health policy, healthcare system designs, and cost effectiveness. According to the Hawaii Immigrant Health Initiative Hawaii Primary Care Association (2004), residents in Hawaii have high rates of chronic conditions such as heart disease, chronic obstructive pulmonary disease (COPD), obesity, and diabetes mellitus (Hawaii Department of Health, 2004) http://www.hawaiipca.net/resources . The program will prepare students to provide individualized and comprehensive care which will enhance self-management capabilities

including enhanced understanding of use of medications for the growing number of patients reported on the Big Island with chronic conditions, including the growing population of older adults.

How the Creation of a DNP Program Will Improve Hawaii Residents' Access to Primary Care

The development of the DNP program will increase the number of primary care providers and experts in healthcare system design, finance, and policy development available to residents of Hawaii. On the Big Island, there are only 76 advanced practice registered nurses (APRNs) (State of Hawaii Board of Nursing Report, October, 2009). This is one of the lowest ratios of APRNs per capita in the US (1 APRN per 2,252.5 residents of the Big Island). Earlier this year the Governor of Hawaii signed legislation deeming APRNs as "primary care providers". The stature grants Hawaii's APRNs with global signature authority, allowing access to full prescriptive authority (including controlled substances), medical equipment, and therapeutic regimens. Their joint formulary authority was moved to the Board of Nursing, providing the flexibility to remove any requirement for a "collegial or supervisory" relationship with a physician. Twenty five of the 50 states allow APRNs to practice without the supervision of a physician.
http://bhpr.hrsa.gov/healthworkforce/reports/statesummaries/hawaii.htm

Improving the Nursing Education Pipeline Here in Hawaii

18-35% of UHH BSN graduates plan to pursue advanced practice/DNP education within one to three years of obtaining their BSN. For example, of the 28 May 2009 BSN graduates, four immediately entered graduate studies. Because we had no UHH SON options they had to leave the Island to pursue their academic goals at UH Manoa, Columbia, and Oregon Health Sciences Center. Please see the attachment A for graduate study intentions of current UHH SON students. The UHH SON currently has an educational pipeline allowing nursing graduates from the community college associate degree programs to complete the baccalaureate degree via online classes and clinical sites on Hawaii Island as well as on the islands of Maui and Kaua'i. In a 2008 survey of Hawaii associate degree and baccalaureate nursing program graduates, 20.2% of respondents indicated that a major factor that has prevented them from obtaining a higher education in nursing is that the an advanced degree in nursing program is not available locally (UH Hilo Department of Nursing, 2006). A post-baccalaureate DNP will allow graduates of baccalaureate nursing programs to seamlessly enter an advanced degree program. In addition, advanced practice nurses already graduated from masters in nursing programs will have the means to complete the DNP at the post-masters level. The addition of the DNP would expand the pool of UHH SON applicants, create a seamless pipeline from pre-nursing licensure to the terminal professional DNP degree, facilitate selection of those candidates who are academically prepared for the rigors of nursing education programs, and allow for greater diversity or geographic distribution throughout the state of Hawaii HRSA (2008). The Nursing Pipeline. Retrieved from the web June 10, 2010 at http://bhpr.hrsa.gov/healthworkforce/reports/nursing/nursinged5/1.htm

Registered nurses working in rural areas are less likely to hold advanced degrees compared with urban counterparts, with implications for lack of nursing leadership in both rural hospitals and rural community health centers (Rural Health Research Center, 2007). The courses will be taught in a hybrid format; onsite, Executive Model weekend and summer intensives onsite and on-line.
http://depts.washington.edu/uwrhrc/uploads/RHRC%20FR115%20Skillman.pdf

In addition to increasing the number of primary care providers available to residents of Hawaii, DNP graduates will also create a pool of qualified nursing faculty candidates to address the severe shortage. Much attention has been focused on the grim realities that healthcare faces due to the current nursing shortage, which is expected to worsen in the next 3 years. The National League for Nursing (NLN) reports a direct correlation between the nursing shortage and the lack of adequate numbers of nursing faculty to teach our future nurses (NLN website, 2009). Unfortunately this is also a shortage that is expected to increase, with 1 in 5 nursing faculty members facing retirement in the next 5 years (NLN website, 2009). The creation of the DNP program will help add qualified applicants to the nursing academic workforce.
http://www.nln.org/governmentaffairs/pdf/Finance%20CommitteeTestimony.pdf

8. Description of Resources Required

8a. Faculty: Currently, the nursing department at UH Hilo has 6 faculty members who are NPs and would be qualified to teach in the proposed program. Because the baccalaureate program is small (by state and national standards), reallocation of faculty resources will have minimal impact on the baccalaureate program, utilization of these faculty members for DNP courses can be supplemented by utilizing visiting scholars/adjunct faculty/lecturers in their place for clinical courses that will enrich the current BSN program. Because the DNP is a relatively new program nationally, accrediting bodies allow and expect that the faculty teaching in the program will not actually have DNP degrees themselves. Faculty who lack doctoral credentials can teach clinical courses. DNP students will have the opportunity to serve as teaching assistants (TAs) which will not only prepare them for academic roles but provide mentored clinical instructors for the undergraduate program.

In addition to utilizing current faculty, creation of the DNP program will require one additional full-time faculty member to be added for each of the first 3 years of implementation of the program. The DNP program is planned to utilize an Executive Model with didactic courses offered one weekend each month or in summer intensive formats with on-line augmentation allowing for utilization of affiliate faculty. This will reduce the cost of faculty salaries because adjunct faculty will be hired on a lecturer basis. The use of adjunct faculty will not only decrease costs of faculty salaries, but also increase flexibility of the Executive Model will increase the ability for the program to recruit a variety of nursing educators who are active experts in their fields, increasing the quality of the program. Our expert consultants, Drs. Novak and Pacquiau, are national nursing leaders in DNP education and have agreed to teach in the program in a summer intensive and on line format. Paying an honorarium, travel and short-term housing costs is significantly less than full time salaries with fringe benefits. These affiliate faculty members will also further enrich the development of UHH SON faculty.

There are no additional costs or faculty requested for the purpose of student support or advising because, much like other nursing programs across the nation, the nursing faculty provide student advising services.

8b. Library Resources: Creation of the DNP program will require the purchase of some additional library journals and textbooks. Program specific software purchases are planned to include SPSS, n-Vivo, EndNotes, and NP-Tracker. The cost of DNP library materials will be funded with planning grant funds. Numbers included in this 5-year budget are a reflection of the required annual professional fees for new cohorts as they enter the program and for an ongoing update of library materials. Please see attachment B.

8c. Physical Resources: No additional physical classroom or faculty office resources will be needed for the UHH SON faculty. A DNP faculty office will be provided by the College of Pharmacy in their annex or modular building until their new building is constructed. The program will make use of existing faculty offices and classrooms in the UCB. Utilization of an Executive Model with didactic courses offered one weekend each month or in intensive summer institute format with on-line augmentation allows for utilization of existing BSN facilities during periods of lower utilization. The community is the laboratory in a DNP program. Experiences will occur in clinics, hospitals, and rural settings created for clinical experiences such as churches and schools. These settings will provide access to research populations for both faculty and students.

8d. Other Resources: Advanced physical assessment equipment and increased library holdings will be funded through the BHPr Congressional Initiative Health Resources & Services Planning Grant.

9. Five Year Business Plan

a. Annual Costs: Annual costs will include faculty salaries, coordination, and clerical personnel. Existing resources and reallocation of existing resources will be utilized. Currently, we have 6 faculty members who are NPs and would be qualified to teach in the proposed program. Please also see *8a Faculty Resources* for additional information related to budget pertaining to faculty costs.

b. Projected Enrollment & Tuition Estimate: The initial cohort accepted into the DNP program will consist of 10 students. After conducting an island wide survey of interest for the program, it is anticipated that the majority of the initially admitted students will be current BSN

students and local registered nurses, the tuition estimates are based on 30% out of state and 70% in-state tuition for the DNP cohorts. Please see (Attachment A) survey of current UHH SON students and alumni intentions for graduate study.

c. Program Funding: This program will be funded by (1) Special BHPr Congressional Initiative Health Resources & Services Grant (2) Campus tuition and fees. BHPr Congressional Initiative Health Resources Grant\funding has already been approved totaling $383,130 to assist with the development and implementation costs. Due to the receipt of this HRSA planning grant and significant support from Senator Daniel Inouye's office, for creation of this proposed program, UHH will be a solid candidate for receipt of the HRSA Advanced Nursing Education Program Grant. Receipt of the HRSA Program Grant will provide $250,000-$350,000 per year in funding for program operational costs. Senate Appropriation funding through HRSA has been allocated to UHH SON for 2010 for $350,000 to assist with this proposed program. Additional funds may be possible through HRSA / Americans Relief and Recovery Act (ARRA) Stimulus Package grants, DHHS/HRSA Division of Nursing Graduate Student Traineeships, Helene Fuld Health Trust, and Johnson and Johnson. Traineeships are provided by the DHHS/HRSA Division of Nursing for DNP students. These traineeship grants occur on an annual basis. The HRSA grant will also cover the cost of teaching assistantships.

d. Does the current or proposed budget include funds or a request for funds for the proposed program? Currently, no request for university funds is anticipated. Existing resources will be reallocated, tuition revenues will be utilized, grant funding already received will be utilized, and additional grants will be sought.

e. Given a "flat budget" situation, how will the proposed program be funded? Existing faculty resources will be used and additional efforts will be exerted to seek external funding.

Five Year Business Plan Table

YEAR	FY 11	FY 12	FY 13	FY 14	FY 15	FY 16
PROGRAM COSTS						
Faculty w/o fringe	82,600	165,200	247,800	273,800	273,800	273,800
Other personnel costs w/o fringe (adjunct lecturers)	4,500	9,000	15,000	15,000	15,000	15,000
Library*	10,000	10,000	10,000	10,000	10,000	10,000
Equipment / Supplies	5,000	10,000	15,000	15,000	15,000	15,000
Other (travel/faculty development/adjunct faculty expenses)	6,500	11,500	16,500	21,500	26,500	26,500
TOTAL Expenses	**108,600**	**205,700**	**304,300**	**335,300**	**340,300**	**340,300**
REVENUES						
Projected Enrollment	10	20	30	35	40	45
No. of Courses	7	14	21	21	21	21
No. of Credits	21	42	64	64	64	64
SSH	210	840	1920	2240	2560	2880
Tuition Rate/Credit**	N/A	N/A	N/A	N/A	N/A	N/A
Total Revenue from Tuition***	156,000	312,000	468,000	540,000	624,000	696,000
Professional Fees ($750 per student per semester)****	15,000	30,000	45,000	52,500	60,000	67,500
Other Sources of Income *****	350,000	350,000	350,000	350,000	350,000	350,000
TOTAL Revenues	**521,000**	**692,000**	**863,000**	**942,500**	**1,034,000**	**1,113,500**

* Note library assessment identified: "The program does not need further resources to begin but it is recommended that after the first few years that the DNP program spend $10,000 per year for the program. The library is requesting $2,000 of this for the OCLC Collection analysis.

** Tuition is set per semester not based on credit hours

*** Total revenue from tuition is based on $6,000 resident and $12,000 non-resident per semester. The expectation is to maintain no less than 70% resident students in the program based on the UH Board of Regents 30% cap on out-of-state student admissions.

****Due to the clinical nature of the practice doctorate, professional fees will be required to off set students' lab expenses

*****Estimates based on receipt of HRSA Program Grant

10. Impact on Current Courses or Programs: The DNP program will have a beneficial impact by building upon the existing Baccalaureate Nursing program at UH Hilo. This opportunity for educational advancement will allow students in the undergraduate program who are seeking to continue their education the opportunity to continue their educational pursuits here at UH Hilo. DNP students will enrich the baccalaureate nursing program by serving as teaching assistants and as role models to undergraduate students. The program will also help with the nursing faculty shortage by creating a larger faculty candidate pool.

11. If program is multidisciplinary, provide evidence of commitment for support from the colleges / departments, and/or individuals expected to participate. N/A

Reviewed by: *(The ATP has completed the campus approval process prior to review by Council of Chief Academic Officers)*

Campus Chief Academic Officer:

Comments and Recommendations:

Philip Castille AUG 1 0 2010

Print Name Signature Date

Council of Chief Academic Officers (System-wide Consultation):

Comments and Recommendations:

Linda K. Johnsrud 8·16·10

Print Name Signature Date

Chancellor: ✓ ***Approved*** ____ ***Disapproved***

Donald Straney, Ph.D.
Chancellor, University of Hawai'i at Hilo

AUG 1 8 2010

Print Name Signature Date

(Final signed copy is provided to the Vice President of Academic Planning and Policy for Program Action Report)

Appendix C
MOU Between UHH & UHM

MEMORANDUM OF AGREEMENT BETWEEN THE SCHOOL OF NURSING AT THE UNIVERSITY OF HAWAI'I AT HILO AND THE SCHOOL OF NURSING AND DENTAL HYGIENE AT THE UNIVERSITY OF HAWAI`I AT MĀNOA

This Memorandum of Agreement (MOA) covers the collaborative work of the nursing programs of the University of Hawai'i at Hilo (UH Hilo) and the University of Hawai'i at Mānoa (UH Mānoa) specific to the Doctor of Nursing Practice (DNP) degree programs. Further, it aligns with the goal and purpose of the December 2009 UH Memorandum of Agreement for the Statewide Nursing Curriculum (baccalaureate degree)[1].

In October, 2004, the American Association of Colleges of Nursing (AACN) *Position Paper on the Practice of Doctorate in Nursing Practice*[2] noted that the health system needed nursing providers competent in providing individual level care and equipped to participate at the system level and launched the national initiative to create the Doctor of Nursing Practice (DNP) as the education and titling for advanced practice nursing. Subsequently, the AACN voted to recommend that the preparation necessary for advanced nursing practice move from the master's degree to the doctorate by the year 2015. The October 2010 Institute of Medicine (IOM) Report, *The Future of Nursing*, took a strong position by recommending a doubling of the number of nurses with a doctorate degree by 2020. The DNP provides the pathway for both the post-baccalaureate and post- master's prepared nurse to continue formal education and access a program targeted to the needs of their practice area.

UH Hilo is recognized for the outstanding rural health and transcultural expertise of the nursing program. As such, the campus is committed to building the primary care workforce for the island of Hawaii by offering a post-baccalaureate family nurse practitioner and post-master`s entry point DNP program. The UH Mānoa DNP program is recognized for its outstanding master`s level specialty programs in advanced practice nursing, clinical nurse specialist, community/public health nursing, and nursing administration. The UH Mānoa Nursing post-master's DNP degree will build upon this well established program, and be targeted to nurses seeking a terminal degree in nursing practice. The DNP at UH Manoa will complement the present research focused doctoral program (PhD).

The collaborative effort of the UH Mānoa and UH Hilo DNP Programs will support state nursing workforce development, with an emphasis on increasing access to primary care services in the community setting, acute services in the hospital setting, strengthened public health nursing and education of nursing leaders. The respective school curricula are guided by the AACN *Essentials of Doctoral Education for Advanced Nursing Practice*. The programs are designed so that <u>all</u> graduates are competent in the eight essentials of doctoral education for advanced nursing practice and prepared for their specialty role in the larger healthcare system as well as on the individual care provider level. The programs will ensure access to the requisite education for advanced practice nursing, contribute to the development of a stronger primary health care system, and improve the health of the residents of the State of Hawai'i.

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[1] http://www.hawaii.edu/offices/app/aa/articulation/Attachment6_Agreement.pdf. Accessed march 28, 2011.

[2] American Association of Colleges of Nursing. AACN Position Statement on the Practice Doctorate in Nursing. Oct. 2004. Available at: http://www.aacn.nche.edu/dnp/pdf/DNP.pdf Accessed 1/19/11.

UH Hilo and UH Mānoa agree as follows:

a. Each program shall offer its own DNP program curriculum and admission requirements. Shared nursing courses may be offered in the future upon mutual agreement between the two programs.
b. Applicants may apply to either school, which becomes the student's "home" campus and that institution will award the degree.
c. Nursing faculty are eligible for a non-compensated graduate faculty appointment at the sister campus, in accordance with UH Board of Regents policy.
d. Programs will meet quarterly, on alternating campuses, to identify joint DNP faculty development needs and develop shared programming for faculty professional development.
e. Programs will meet quarterly, on alternating campuses, to develop near- and long-term strategies for collaborative educational experiences.
f. Programs will create a joint curriculum committee, composed of faculty representatives from each campus, to assess post-master's level course syllabi for equivalency and create processes for such courses to share alpha and number, title, credits, course description and student learning outcomes.
g. Programs will work together to create and offer one joint summer seminar and symposium for courses including, but not limited to, evidence based practice, system innovation and management, and health policy.
h. Programs will share the costs required to provide student and faculty access to electronic library and technology resources across both programs.

The terms of this agreement are subject to University of Hawaii Board of Regents policies. Amendments to this agreement must be in writing and approved by the designated representatives of each campus. This Memorandum of Agreement will remain in effect until Fall 2017. It will be subject to review in Spring 2017 and may be continued, revised, or discontinued with the consent of the two campuses represented in this agreement. The MOA remains in effect in review.

UNIVERSITY OF HAWAI'I AT HILO

By Donald Straney — Date: 6 April 11
Donald Straney
Chancellor

By Kenith Simmons — Date: APR 0 6 2011
Kenith Simmons
Interim VCAA

UNIVERSITY OF HAWAI'I AT HILO (continued):

By _____ Date: 4-6-11
Randy Hirokawa
Dean, College of Arts and Sciences

By _____ Date: April 05, 2011
Katharyn Daub
Director, School of Nursing

UNIVERSITY OF HAWAI`I AT MĀNOA

By _____ Date: _____
Virginia Hinshaw
Chancellor

By _____ Date: APR - 1 2011
Reed Dasenbrock
Vice Chancellor for Academic Affairs

By _____ Date: MAR 31 2011
Mary G. Boland
Dean, School of Nursing and Dental Hygiene

Appendix D
US Senate Bill S3859

111TH CONGRESS
2D SESSION

S. 3859

To express the sense of the Senate concerning the establishment of Doctor of Nursing Practice and Doctor of Pharmacy dual degree programs.

IN THE SENATE OF THE UNITED STATES

SEPTEMBER 28, 2010

Mr. INOUYE introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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A BILL

To express the sense of the Senate concerning the establishment of Doctor of Nursing Practice and Doctor of Pharmacy dual degree programs.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled, That:

SECTION 1. SHORT TITLE.

This Act may be cited as the "Doctor of Nursing Practice and Doctor of Pharmacy Dual Degree Program Act of 2010".

SEC. 2. FINDINGS.

The Senate makes the following findings:

1 (1) The terms dual, joint, double or combined
2 degrees are used interchangeably, the overall defini-
3 tion is students working for two different and dis-
4 tinct degrees in parallel, completing two degrees in
5 less time than it would take to complete each sepa-
6 rately.
7 (2) The overall purpose of the innovative cross
8 cutting dual or joint degree nursing programs is to
9 prepare nurses to expand the traditional scope of
10 nursing practice, with the goal of strengthening
11 health care teams.
12 (3) The American Association of Colleges of
13 Nursing (AACN) 2009 survey of schools of nursing
14 documents that there are over 100 nursing schools
15 that offer dual degree programs of which 74 are
16 MSN/MBA programs, 34 are MSN/MPH programs,
17 10 are MSN/MHA programs, 5 are MSN/MPA pro-
18 grams, 4 are MSN/MDIV programs, and 3 are
19 MSN/JD programs.
20 (4) There is currently no dual degree program
21 that combines nursing and pharmacology.
22 (5) Recently, the University of Hawaii at Hilo
23 has explored the option of nursing and pharmacy
24 partnering to meet the needs of the changing health
25 care field.

1 **SEC. 3. SENSE OF THE SENATE.**

2 It is the sense of the Senate that—

3 (1) there should be established a Doctor of
4 Nursing Practice (DNP) and Doctor of Pharmacy
5 (PharmD) dual degree program;

6 (2) the development of a joint degree in nursing
7 and pharmacology should combine a Doctor of Nurs-
8 ing Practice (DNP) with a Doctor of Pharmacy
9 (PharmD);

10 (3) the significance of such a dual degree pro-
11 gram would be improving patient outcomes;

12 (4) through such a dual collaborative role,
13 health providers will be better able to meet the
14 unique needs of rural communities across the age
15 continuum and in diverse settings;

16 (5) such a dual degree program—

17 (A) would enhance collaboration between
18 Doctors of Nursing Practice and physicians re-
19 garding drug therapy;

20 (B) would provide for research concerning,
21 and the implementation of, safer medication ad-
22 ministration;

23 (C) would broaden the scope of practice for
24 pharmacists through education and training in
25 diagnosis and management of common acute
26 and chronic diseases;

1 (D) would provide new employment oppor-
2 tunities for private physician or nurse managed
3 clinics, walk-in clinics, school or college clinics,
4 long-term care facilities, Veteran Administra-
5 tion facilities, hospitals and hospital clinics,
6 hospice centers, home health care agencies,
7 pharmaceutical companies, emergency depart-
8 ments, urgent care sites, physician group prac-
9 tices, extended care facilities, and research cen-
10 ters; and
11 (E) would assist in filling the need for pri-
12 mary care providers with an expertise in geri-
13 atrics and pharmaceuticals; and
14 (6) additional research and evaluation should be
15 conducted to determine the extent to which grad-
16 uates of such a dual degree program improve pri-
17 mary health care, address disparities, diversify the
18 workforce, and increase quality of service for under-
19 served populations.

Appendix E
UHH Library Letter

UNIVERSITY OF HAWAI'I AT HILO
EDWIN H. MOOKINI LIBRARY

Linda Marie Golian-Lui
University Librarian

Date: December 8, 2009

To: Kay Daub, Chair and Professor Nursing
C: Phil Castille, VC Academic Affairs
Randy Hirokawa, Dean CAS
Amy Knehans, Pharmacy and Health Sciences Librarian
UHH Mookini Librarians
Re: Library's Assessment Doctorate in Nursing Practice

Dear Kay:

Thank you for the opportunity to work with you concerning the proposed Doctorate in Nursing Practice. Attached is an assessment written by Ms. Amy Knehans, Pharmacy and Health Sciences Librarian. I have had an opportunity to work with Ms. Knehans concerning this final report and have provided her my feedback for this document.

In summary, the preliminary findings show that approximately $10,000 a year will be needed to support this new program at the University of Hawaii at Hilo. However, this is a preliminary finding and this budget does not include ANY audiovisual materials.

At this time, I am requesting $2,000 in planning money for a final library assessment that will be prepared by March 1, 2010. Please notify me if you need this final assessment completed prior to March 1, 2010. The cost of the OCLC collection analysis tool I believe we should use for our final library assessment is $4,500. The Mookini Library will pay the additional $2,500 since we could use this tool to assess other collection areas.

A final library assessment is pending the completion of an OCLC collection analysis study with 3-5 peer institutions identified by you, Dr. Daub. In addition, I am charging Ms. Knehans with contacting a minimum of 3-5 librarians at public academic institutions that have recently (within the last 3 years) added a Doctorate in Nursing Practice to learn how this new program has impacted their library services and collections. Ms. Knehans is also instructed to gather information concerning what these peer librarians felt they did right in preparing their library for the Doctorate in Nursing Practice, what they would do differently, and any other advice they share.

I thank you for the opportunity to collaborate on this project and look forward to providing a final assessment in the near future.

200 W. KAWILI STREET • EDWIN H. MOOKINI LIBRARY •HILO, HAWAI'I 96721
TEL (808) 974-7759 • FAX (808) 974-7329